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Fill in this information to iden United States Bankruptcy Cour Northern District of Illinois		UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS NOV 0 7 2016
Case number (# known):	Chapter you are filing under: ☑ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13	JEFFREY P. ALLSTEADT, CLERK Check if this is an amended filing
Official Form 101		
Voluntary Pet	ition for Individuals Filin	g for Bankruptcy 12/15
the answer would be yes if eith Debtor 2 to distinguish betweer same person must be Debtor 1 Be as complete and accurate as	them. In joint cases, one of the spouses must report in all of the forms. possible. If two married people are filing together, both eded, attach a separate sheet to this form. On the top of	ettors. For example, if a form asks, "Do you own a car," it the spouses separately, the form uses Debtor 1 and information as Debtor 1 and the other as Debtor 2. The
t. Your full name	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Write the name that is on your government-issued picture identification (for example, your driver's license or	Suzanne First name Marie	First name
passport). Bring your picture identification to your meeting with the trustee.	Middle name Miller-korstanje Last name	Middle name Last name
	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
. All other names you have used in the last 8	Suzanne First name	First name
years Include your married or maiden names.	Marie Middle name Kehoe	Middle name
	Suzanne First name	Last name
	Marie Middle name	First name Middle name
	Miller Last name	Last name
Only the last 4 digits of your Social Security number or federal	xxx - xx - 2 7 2 2 OR	XXX - XX -
Individual Taxpayer Identification number (ITIN)	9 xx - xx	OR 9 xx - xx

3.

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Debtor 1 Suzanne M I	Miller-Korstanje	Case number (d known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
 Any business names and Employer Identification Numbers (EIN) you have used in 	I have not used any business names or EINs.	I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN	EIN
5. Where you live		If Debtor 2 lives at a different address:
	2276 W. Nichols Number Street	Number Street
	Apt. A	
	Arlington Hts. II 60004 City State ZIP Code	City State ZIP Code
	Cook County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
6. Why you are choosing this district to file for	Check one:	Check one:
bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	I have another reason. Explain. (See 28 U.S.C. § 1408.)	I have another reason. Explain. (See 28 U.S.C. § 1408.)

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D	ebtor 1 Suzanne M N Frist Name Middle No		orstan Last Nan	<u>ie</u>		Case number or	known)			
ŀ	Tell the Court About	ut Your I	sankru	otcy Case						
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	are choosing to file under	✓ Cha	Chapter 7							
		☐ Cha	pter 11							
		🔲 Cha	pter 12							
		☐ Cha	pter 13							
8.	How you will pay the fee	loca you sub with I ne App	I court self, you nitting; a pre-p ed to p lication	or more details about he way pay with cash, of our payment on your beinted address. ay the fee in installment for Individuals to Pay 7 wat my fee be waived to the control of the control	now you reashier's openalf, you note that the second of th	may pay. Typical check, or money ur attorney may bu choose this op Fee in Installme	eck with the clerk's office in your ly, if you are paying the fee order. If your attorney is pay with a credit card or check potion, sign and attach the ents (Official Form 103A).			
9.	Have you filed for	less pay	than 1: the fee	50% of the official pove	rty line th choose th	at applies to you nis option, you m	ir family size and you are unable to nust fill out the Application to Have the			
	bankruptcy within the last 8 years?	🔲 Yes.	District		When		Case number			
			Diatirot		venen	MM / DD / YYYY	Case number			
			District		When	MM / DD / YYYY	Case number			
10.	Are any bankruptcy	☑ No				(VIIV) (OO) 1111				
	cases pending or being filed by a spouse who is	Yes.	Debtor				Relationship to you			
not filing this case with you, or by a business partner, or by an affiliate?							Case number, if known			
			Debtor			· · · · · · · · · · · · · · · · · · ·	Relationship to you			
			District		When	késé / MM / VVVV	Case number, if known			
						WWW/DD/IIII				
	Do you rent your residence?	No. Ves.	Go to lii Has you residen	ır landlord obtained an ev	iction judgi	ment against you a	and do you want to stay in your			
				Go to line 12.						
			Yes this	Fill out <i>Initial Statement</i> , bankruptcy petition.	About an E	Eviction Judgment .	Against You (Form 101A) and file it with			

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Debtor 1 Suzanne M N Fist Name Middle Na	/liller-k	Corstanje	DOTS AND THE COLUMN TO THE COL	Ca	se number (# know	n)	
Pan S Report About Any	Busines	ses You Own as a S	ole Propr	ietor	ettävitää tiivinimin opaniikettiin siirikkiin siirikkiin siirikkiin siirikkiin siirikkiin siirikkiin siirikkii	ganifik en Normalioko supersususususususususususususususususususu	Periodeliste in the Control of the C
12. Are you a sole proprietor	Z No.	Go to Part 4.					
of any full- or part-time business?	Q Yes	. Name and location of b	usiness				
A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or		Name of business, if any					***************************************
LLC. If you have more than one sole proprietorship, use a		Number Street					
separate sheet and attach it to this petition.		City			01-1-	715.0	
		Oity			State	ZIP Code	
		Check the appropriate	box to desc	ribe your busine	SS.		
		Health Care Busine					
		☐ Single Asset Real E)	
		Stockbroker (as def					
		Commodity Broker	(as defined	in 11 U.S.C. § 1	01(6))		
		Mone of the above					
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	can set most re	re filing under Chapter 1: appropriate deadlines. If cent balance sheet, state nese documents do not e	you indicat ment of ope	e that you are a erations, cash-fl	small business ow statement	s debtor, you must a	aftach vour
For a definition of small		I am not filing under Cha	·				
business debtor, see 11 U.S.C. § 101(51D).	☐ No.	I am filing under Chapte the Bankruptcy Code.	r 11, but l a	ım NOT a small	business debto	or according to the	definition in
	☐ Yes.	I am filing under Chapte Bankruptcy Code.	r 11 and La	ım a small busin	ess debtor acc	cording to the defini	lion in the
Part 4: Report if You Own o	r Have	Any Hazardous Prop	erty or A	ny Property T	hat Needs I	mmediate Atter	PÉÉGET
Do you own or have any property that poses or is	🛭 No						
alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any	☐ Yes.	What is the hazard?	PAR JANUARA				
property that needs immediate attention?		If immediate attention is	s needed, w	hy is it needed?	}		
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			NAME OF THE OWNER OWNER OF THE OWNER OWNE				
		Where is the property?	Number	Street			
			***************************************		*****	***************************************	THE SALES AND AND ADDRESS OF THE SALES AND ADD
			City	· · · · · · · · · · · · · · · · · · ·	***************************************	State ZIF	Code

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Debtor 1

Suzanne M Miller-Korstanje

Case number (if known

Part 5

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

You must check one.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

lan	not	required	to	receive	a	briefing	about
cre	dit co	ounseling	b	ecause o	of:		

I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

lam	not	required	to	receive	a	briefing	about
		unseling					

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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De	ebtor 1 Suzanne M N	Miller-Korstanje	Case	number (# кломп)	The second secon			
P	art 6: Answer These Que	stions for Reporting Purposes						
16	. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."						
	you nave:	☐ No. Go to line 16b. ☐ Yes. Go to line 17.						
		16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.						
		No. Go to line 16c. Yes. Go to line 17.						
		16c. State the type of debts you ow	ve that are not consumer de	ebts or business d	ebts.			
17.	. Are you filing under Chapter 7?	No. I am not filing under Chapt	ter 7. Go to line 18.		TOTAL CONTRACTOR OF THE CONTRA			
	Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7 administrative expenses a No Yes	7. Do you estimate that afte re paid that funds will be av	r any exempt prop vailable to distribut	erty is excluded and e to unsecured creditors?			
18.	How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000			
19.	How much do you estimate your assets to be worth?	■ \$0-\$50,000 ■ \$50,001-\$100,000 ■ \$100,001-\$500,000 ■ \$500,001-\$1 million	\$1,000,001-\$10 millio \$10,000,001-\$50 milli \$50,000,001-\$100 mill \$100,000,001-\$500 m	on 📮	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
20.	How much do you estimate your liabilities to be?	3 \$0-\$50,000 3 \$50,001-\$100,000 3 \$100,001-\$500,000 3 \$500,001-\$1 million	☐ \$1,000,001-\$10 million ☐ \$10,000,001-\$50 million ☐ \$50,000,001-\$100 million ☐ \$100,000,001-\$500 million	on 🔲 lion 🔾	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion			
7	ਹਿਓA Sign Below							
Fo	er you	I have examined this petition, and I correct.	declare under penalty of pe	erjury that the infor	mation provided is true and			
		If I have chosen to file under Chapte of title 11, United States Code. I undunder Chapter 7.	er 7, I am aware that I may derstand the relief available	proceed, if eligible under each chapt	, under Chapter 7, 11,12, or 13 er, and I choose to proceed			
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		I understand making a false stateme with a bankruptcy case can result in 18 U.S.C. §§ 152, 1341, 1519, and 3	fines up to \$250,000, or im	obtaining money on prisonment for up	or property by fraud in connection to 20 years, or both.			
		Signatuke of Debtor 1	hoplogox	Signature of Debt	or 2			
		Executed on / 5 2011	Ç	Executed on	/ DD /YYYY			

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Debtor 1 Suzanne MM First Name Middle Name		Case number (it known)	
For your attorney, if you are represented by one If you are not represented by an attorney, you do not need to file this page.	I, the attorney for the debtor(s) named in this petitic to proceed under Chapter 7, 11, 12, or 13 of title 1 available under each chapter for which the person the notice required by 11 U.S.C. § 342(b) and, in a knowledge after an inquiry that the information in the Signature of Attorney for Debtor	1, United States Code, an is eligible. I also certify the case in which § 707(b)(4 he schedules filed with the	d have explained the relief nat I have delivered to the debtor(s) (D) applies, certify that I have no
	Printed name		
	Number Street		
	City	State	ZIP Code
	Contact phone	Email address	
	Bar number	State	

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Debtor 1 Suzanne M Miller-Korstanje Case number (#/mown)_

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

	on with long-term financial and legal						
☐ No ☐ Yes							
Are you aware that bankruptcy fraud is a serious crime and that if your bankruptcy forms are inaccurate or incomplete, you could be fined or imprisoned?							
☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out your bankruptcy fo							
							Yes. Name of Person
Attach Bankruptcy Petition Preparer's Notice, Decl	aration, and Signature (Official Form 119).						
By signing here, I acknowledge that I understand the ris have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an						
have read and understood this notice, and I am aware the	nat filing a bankruptcy case without an						
have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an do not properly handle the case.						
have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an do not properly handle the case. Signature of Debtor 2 Date						
have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I signature at Debtor 1 Date I Solice MMV DD / YYYYY	nat filing a bankruptcy case without an do not properly handle the case. Signature of Debtor 2 Date MM / DD / YYYY						

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Fill in this information to identify your case:	
Debtor 1 Suzanne M Miller-Korstanje First Name Middle Name Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (If known)	Check if this is an
(i) RIOWIT	amended filing
055-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	
Official Form 106Sum Summary of Your Assets and Liabilities and Cartain Statistical Land	£
Summary of Your Assets and Liabilities and Certain Statistical In Be as complete and accurate as possible. If two married people are filing together, both are equally responsible	
information. Fill out all of your schedules first; then complete the information on this form. If you are filing amen your original forms, you must fill out a new Summary and check the box at the top of this page.	ided schedules after you file
Page 14 Summarize Your Assets	
Juminarize Your Assets	
	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)	value or what you own
1a. Copy line 55, Total real estate, from Schedule A/B	
1b. Copy line 62, Total personal property, from Schedule A/B	\$ 933.52
1c. Copy line 63, Total of all property on Schedule A/B	\$ 933.52
Page 24 Summarize Your Liabilities	PMANOSOCIANS BESTÄLD Eiddhalahainn fachiopa (1940) God skeilidd allach argayn appenyd hydrol arbanan argayn g
	Your liabilities
	Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+ \$ 50,906.00
Your total liabilitie	s 50,906.00
Part 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	T
5. Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	s

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D	ebtor 1	Suzanne M Miller-Korstanje First Name Middle Name Last Name	ase number (# known)			
·	art 4:	Answer These Questions for Administrative and Statistical Record	s			
6	Are yo	u filing for bankruptcy under Chapters 7, 11, or 13?				
	☐ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. ☐ Yes					
7.	What ki	nd of debt do you have?				
	You fam	or debts are primarily consumer debts. Consumer debts are those "incurred by an airly, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpo	n individual primarily for a personal, oses. 28 U.S.C. § 159.			
	You this	r debts are not primarily consumer debts. You have nothing to report on this par form to the court with your other schedules.	rt of the form. Check this box and submit			
8.	From th	ne Statement of Your Current Monthly Income: Copy your total current monthly in	ocome from Official			
	Form 12	2A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.	\$ <u>1,542.00</u>			
9.	Copy th	e following special categories of claims from Part 4, line 6 of Schedule E/F:				
			Total claim			
	From	Part 4 on Schedule E/F, copy the following:				
	9a. Dom	estic support obligations (Copy line 6a.)	\$			
	9b. Taxe	s and certain other debts you owe the government. (Copy line 6b.)	\$			
	9c. Clain	ns for death or personal injury while you were intoxicated. (Copy line 6c.)	\$			
	9d. Stude	ent loans. (Copy line 6f.)	s11,000.00			
	9e. Oblig priori	ations arising out of a separation agreement or divorce that you did not report as ty claims. (Copy line 6g.)	\$			
	9f. Debts	s to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$			
	9g. Total	. Add lines 9a through 9f.	\$11,000.00			

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Fill in this information to identify your case and th	is filing:		
Debtor 1 Suzanne M Miller-Korstanje			
First Name Middie Name	Last Name		
Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name		
United States Bankruptcy Court for the: Northern District of	f Illinois		
Case number			
			Check if this is an
			amended filing
Official Form 106A/B			
Schedule A/B: Propert	ty .		12/15
In each category, separately list and describe item category where you think it fits best. Be as comp responsible for supplying correct information. If n write your name and case number (if known). Ans Para 1: Describe Each Residence, Building	ete and accurate as possible. If two married peopl nore space is needed, attach a separate sheet to the	le are filing together, bonis form. On the top of a	oth are equally
Do you own or have any legal or equitable interest	est in any residence, building, land, or similar pror	erty?	
No. Go to Part 2.	prog	vity.	
Yes. Where is the property?			
	What is the property? Check all that apply.	Do not deduct secured d	
1.1. Street address, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secured claims on Schedule Creditors Who Have Claims Secured by Prope	
Street address, if available, or other description	Condominium or cooperative	Current value of the	Current value of the
	Manufactured or mobile home Land	entire property?	portion you own?
	☐ Land ☐ Investment property	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	
	Other	interest (such as fee the entireties, or a life	
	Who has an interest in the property? Check one.		
County	Debtor 1 only Debtor 2 only		
Courry	Debtor 1 and Debtor 2 only	☐ Check if this is co	mmunity property
	☐ At least one of the debtors and another	(see instructions)	
	Other information you wish to add about this it property identification number:	em, such as local	
If you own or have more than one, list here:			
	What is the property? Check all that apply.	Do not deduct secured da	ims or exemptions. Put
1.2	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secured Creditors Who Have Clain	d daims on <i>Schedule D:</i>
Street address, if available, or other description	Condominium or cooperative	Current value of the	, , ,
	☐ Manufactured or mobile home	entire property?	portion you own?
	Land Investment property	\$	\$
City State ZIP Code	Investment property Timeshare	Describe the nature o	f your ownership
City State ZIP Code	Other	interest (such as fee the entireties, or a life	simple, tenancy by estate), if known
	Who has an interest in the property? Check one.		
	Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only	(T)	
	At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
	Other information you wish to add about this item	,	

property identification number: ____

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Debtor 1	Suzanne M Miller-Korstanje First Name Middle Name Last Name	Case number (# known)			
		What is the property? Check all that apply.	Do not deduct secured o	laims or exemptions. Put	
1.3.	Street address, if available, or other description	☐ Single-family home ☐ Duplex or multi-unit building	the amount of any secur	ed claims on Schedule D: ims Secured by Property.	
	oneer address, if available, or other description	Condominium or cooperative Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?	
		Land	\$	\$	
	City State ZIP Code	Investment property	Describe the nature	of your ownership	
	Only State 21P Code	Timeshare Other	interest (such as fee the entireties, or a li	simple, tenancy by	
		Who has an interest in the property? Check one.	me emacaes, or a n	e estate), il kilowii.	
	County	Debtor 1 only			
	County	Debtor 2 only	,		
		Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is constructions)	ommunity property	
		Other information you wish to add about this its			
		property designed number.			
Add t	he dollar value of the portion you own for al	l of your entries from Part 1, including any entrie	s for pages	c	
you h	nave attached for Part 1. Write that number h	nere.	······································	P	
Part 2:	Describe Your Vehicles				
o you o ou own f	own, lease, or have legal or equitable interes that someone else drives. If you lease a vehicle	et in any vehicles, whether they are registered or it in any vehicles, whether they are registered or it is also report it on Schedule G: Executory Contracts in a second or its contracts.	not? Include any vehicle	S	
			and onexpired Eduses.		
. Cars, ☑ No	vans, trucks, tractors, sport utility vehicles,	motorcycles			
Q Ye					
	Make:	Who has an interest in the property? Check one.			
3.1.	Model:	Debtor 1 only	Do not deduct secured cla the amount of any secure	d claims on Schedule D:	
	Year.	Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.	
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?	
	Other information:	At least one of the debtors and another	anno proporty,	portion you over.	
	Other internation.	Check if this is community property (see instructions)	\$	\$	
If you	own or have more than one, describe here:				
3.2.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cla	ims or exemptions. Put	
	Model:	Debtor 1 only	the amount of any secured Creditors Who Have Clain	d claims on Schedule D:	
	Year:	Debtor 2 only			
	Approximate mileage:	Debtor 1 and Debtor 2 only At least one of the debtors and another	Current value of the entire property?	Current value of the portion you own?	
	Other information:	At least one of the debtors and another	· -	-	
		Check if this is community property (see instructions)	\$	\$	

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	First Name Middle Name Last No.	Case number (#	KROWN)	***************************************
3.3.	Make:	Who has an interest in the property? Check one.	Do not deduct secured cl.	aims or exemptions. Put
	Model:	Debtor 1 only	the amount of any secure Creditors Who Have Clair	d claims on Schedule D:
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of th portion you own?
		At least one of the debtors and another	onthis property :	portion you own:
	Other information:	Check if this is community property (see instructions)	\$	\$
3.4.	Make:	Who has an interest in the property? Check one.	Ph	
3.4.		Debtor 1 only	Do not deduct secured cla the amount of any secure	
	Model:	Debtor 2 only	Creditors Who Have Clair	
	Year:	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	At least one of the debtors and another	entire property?	portion you own?
	Other information:			
		☐ Check if this is community property (see instructions)	\$	\$
Exam ✓ No ☐ Ye	0	craft, fishing vessels, snowmobiles, motorcycle accesso	ries	
Ø Ne □ Ye	0	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla	claims on Schedule D:
Ø Ne □ Ye	oes Make:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured cla	claims on Schedule D:
Ø Ne □ Ye	Make:	Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured cla	I claims on Schedule D: is Secured by Property.
Ø Ne □ Ye	Make:Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the	I claims on Schedule D: as Secured by Property. Current value of the
☑ No. □ Ye	Make:Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the	I claims on Schedule D: is Secured by Property. Current value of the portion you own?
✓ No. Ye 4.1.	Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see	Do not deduct secured cla the amount of any secured Creditors Who Have Claim Current value of the	I claims on Schedule D: Is Secured by Property. Current value of the portion you own?
✓ No.✓ Ye4.1.If you4.2.	Make: Make: Model: Year: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clai the amount of any secured	d claims on Schedule D: is Secured by Property. Current value of the portion you own? \$
✓ No. Ye 4.1. If you 4.2.	Make: Model: Year: Other information: own or have more than one, list here: Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clait the amount of any secured Creditors Who Have Claim	I claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$
2 N₁	Make: Model: Year: Other information: own or have more than one, list here: Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the	claims on Schedule D: ss Secured by Property. Current value of the portion you own? \$
2 N₁	Make: Model: Year: Other information: own or have more than one, list here: Make: Model:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured clathe amount of any secured Creditors Who Have Claim Current value of the entire property? \$ Do not deduct secured clait the amount of any secured Creditors Who Have Claim	I claims on Schedule D: Is Secured by Property. Current value of the portion you own? \$
₩ Nt	Make: Model: Year: Other information: own or have more than one, list here: Make: Model: Year:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cla the amount of any securec Creditors Who Have Clain Current value of the entire property? \$ Do not deduct secured clai the amount of any secured Creditors Who Have Claim Current value of the	daims on Schedule D: is Secured by Property. Current value of the portion you own? \$

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Debtor 1

Suzanne M Miller-Korstanie

~~~~	141 14111101 1101	starije	O
First Name	Middle Name	Last Name	Case number (if known)

Part 3: Describe Your Personal and Household Items		
Do you own or have any legal or equitable interest in any of the following items?	Current va portion yo Do not dedu or exemptior	u own? of secured claims
6. Household goods and furnishings	•	
Examples: Major appliances, furniture, linens, china, kitchenware		
□ No		
Yes. Describe 2 couches, 2 lamps, desk, microwave	\$	200.00
7. Electronics		
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games		
□ No		
Yes. Describe t.v., stereo, table & chairs, computer, 2 beds, camera	\$	300.00
8. Collectibles of value		
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles  No		
Yes. Describe	s	
9. Equipment for sports and hobbies	Ψ	
• • • • • • • • • • • • • • • • • • • •		
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments  No		
Yes. Describe		
	\$	
10. Firearms		
Examples: Pistols, rifles, shotguns, ammunition, and related equipment		
☑ No		
Yes. Describe	\$	
11. Clothes		
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories		
No		
Yes. Describe 10 dresses, 10 pairs of shoes, 12 blue jeans, 2 belts, 10 sweaters	\$	400.00
12. Jewelry		
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver		
□ No		
Yes. Describerosary necklace	\$	25.00
13. Non-farm animals		
Examples: Dogs, cats, birds, horses		
☑ No		
Yes. Describe	\$	
Any other personal and household items you did not already list, including any health aids you did not list	** www.comb. hand. and hand. and hand hand hand hand hand hand hand	THE PARTY OF THE P
☑ No		
Yes. Give specific		
information	\$	
5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached		005.00
for Part 3. Write that number here	\$	925.00

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Debtor 1

Suzanne M Miller-Korstanje

Debtor 1	Suzanne M Miller-Korstanje	Case number (#known)	
	First Name Middle Name Last Nam	ie:	
Part 4:	Describe Your Financial Assets		
	Describe Your Financial Assets		
Do you ov	vn or have any legal or equitable interes	in any of the following?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. Cash	les: Money you have in your wallet in your	home, in a safe deposit box, and on hand when you file your petition	
	ios. Worldy you have an your waller, an your	nonic, in a said deposit box, and off hard when you like your petition	
	3	Cash:	s 3.00
		Cash	\$ <u>3.00</u>
Examp	and other similar institutions. If you hav	ecounts; certificates of deposit; shares in credit unions, brokerage hous e multiple accounts with the same institution, list each.	ses,
LJ Yes	·	Institution name:	
	17.1. Checking account:	TCF	\$5.52
	17.2. Checking account:	TCF	\$ 0.00
	17.3. Savings account:		
	17.4. Savings account:		\$
	17.5. Certificates of deposit		\$
	17.6. Other financial accou	nt:	
	17.7. Other financial accou	nt:	
	17.8. Other financial accou	nt:	
	17.9. Other financial accou	ot:	
			¥
	mutual funds, or publicly traded stocks es: Bond funds, investment accounts with b	vakaraga firma, magau maskat agasunta	
Z No	55. DONG IGHUS, HIVESTINETH ACCOUNTS WITH D	tokerage inns, money market accounts	
	Institution or issuer name:		
			\$
	Manufacture and a second secon		\$
	<b>V</b>		\$
		porated and unincorporated businesses, including an interest in	
an LLC ☑ No	, partnership, and joint venture		
MA NO	Name of entity:	% of ownership:	

☐ Yes. Give specific

information about

them.....

0%

0%

0%

%

_%

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Document Page 16 of 67 Suzanne M Miller-Korstanje Debtor 1 Case number (if known)_ 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. 2 No Yes. Give specific Issuer name: information about them..... 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans Z No Yes. List each account separately. Type of account: Institution name: 401(k) or similar plan: Pension plan: IRA: Retirement account: Keogh: Additional account: Additional account: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others Z No Q Yes Institution name or individual: Electric: Gas: Heating oil: Security deposit on rental unit: Prepaid rent: Telephone: Water: Rented furniture: Other: 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)

☐ Yes.....

Issuer name and description:

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Debtor 1	Suzanne M Miller-k			•	
	First Name Mixidie Name	i.asi	Name	Case Harriber (it known)	
26 U.S.	ts in an education IRA, in C. §§ 530(b)(1), 529A(b), a	an account and 529(b)(1)	in a qualified ABLE prog	ram, or under a qualified state tuition prog	ram.
Z No					
☐ Yes	lnc	titution namo	and description Consult	d. Clada	
	ires	ilitation name	and description, Separate	ely file the records of any interests.11 U.S.C. §	521(c):
					<u> </u>
					7
					<u> </u>
25. Trusts, exercis	equitable or future intere able for your benefit	sts in proper	ty (other than anything	listed in line 1), and rights or powers	
No					
Yes.	. Give specific				
infor	mation about them				\$
26. Patents	, copyrights, trademarks,	trade secre	is, and other intellectual	property	
	es: Internet domain names,	websites, pro	oceeds from royalties and	ficensing agreements	
<b>Z</b> No					
	Give specific				
infor	mation about them				\$
27. <b>License</b> Example	s, franchises, and other g	general intan	gibles	ldings, liquor licenses, professional licenses	
Z No			- sparation accounting the	namys, ildustricerises, professional licenses	
	Give specific				
infon	mation about them				¢.
					<b>\$</b>
Money or p	roperty owed to you?				
	, , ,				Current value of the portion you own?  Do not deduct secured claims or exemptions.
28. Tax refu	nds owed to you				
No					
Yes.	Give specific information				
	about them, including whet			Federal:	\$
	you already filed the return and the tax years			State:	\$
				Local;	\$
29. Family s					
Examples	s: Past due or lump sum ali	mony, spousa	al support, child support, n	naintenance, divorce settlement, property settl	ement
<b>⊟</b>			•	., y y	

**2** No

☐ Yes. Give specific information.....

Alimony:	\$
Maintenance:	\$
Support:	\$
Divorce settlement:	\$
Property settlement:	\$

30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

☐ Yes. Give specific information.....

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Suzanne M Miller-Korstanje Debtor 1 Case number (if known), Middle Name Last Name 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance 2 No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value: of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. A No ☐ Yes. Give specific information..... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Z No Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims Z No Yes. Describe each claim. 35. Any financial assets you did not already list Z No Yes. Give specific information..... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached 8.52 for Part 4. Write that number here Part 5 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38 Accounts receivable or commissions you already earned Z No Yes. Describe...... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices V No Yes. Describe......

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Debtor 1	Suzarrie i	VI IVIIIIEI-NOISTANJE  Middle Name Last Name	Case number (if known)	
	· POR INGIPACE	Middle Name Last Name		
40. Machin	ery, fixtures. e	quipment, supplies you use in business, an	d tools of your trade	
₩ No		, , , , , , , , , , , , , , , , , , , ,	a toolo oi your maac	
	. Describe			_
				\$
41. Invento	m/			
₩ No	· y			
Yes	Describe			\$
				The state of the s
42. Interest	s in partnersh	ps or joint ventures		
☑ No				
Yes.	Describe	Name of entity:	% of ownership:	
			%	\$
			%	\$
			%	\$
43. Custom	er lists, mailin	g lists, or other compilations		
☑ No	or mous, mann	g now, or other complianous		
Yes.		include personally identifiable information (	as defined in 11 U.S.C. § 101(41A))?	
	☐ No			
	Yes. Descri	íbe		\$
				¥ <u></u>
	iness-related	property you did not already list		
✓ No □ Voc	Give specific			
	mation			\$
				\$
				\$
				\$
				\$
				\$
5. Add the	dollar value o	fall of your entries from Part 5, including ar		
for Part	5. Write that n	umber here		\$
Part 6:	Describe An	y Farm- and Commercial Fishing-Relat	ed Property You Own or Have an Interest I	n.
	ii you own or	have an interest in farmland, list it in Part 1.		
6. Do you o	wn or have an	y legal or equitable interest in any farm- or	commercial fishing-related property?	
No. G	So to Part 7.	•	,	
☐ Yes.	Go to line 47.			
				Current value of the
				portion you own?  Do not deduct secured claims
7. Farm ani	mais			or exemptions.
		ultry, farm-raised fish		
☑ No	• •	-		
	×			
				¢
				-23

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Debtor 1	Suzanne M Miller-Korstanje	·	C	ase number (if known)		
	First Name Last Name					
48. <b>Crops</b> —	-either growing or harvested					
2 No					:	
	. Give specific rmation				\$	
	nd fishing equipment, implements, machinery, fixtur	es, and tools of	trade			
🗹 No		,				
Yes						
					Ψ	
50, <b>Farm a</b> r <b>ZÍ</b> No	nd fishing supplies, chemicals, and feed					
					\$	······································
	m- and commercial fishing-related property you did	not already list				
<b>✓</b> No	s. Give specific					
	rmation				\$	
52. Add the	e dollar value of all of your entries from Part 6, inclu	ding any entries	for pages	you have attached	s	
for Par	t 6. Write that number here					
Part 7:	Describe All Property You Own or Have	an Interest	in That	You Did Not List Above		
sa Do you	have other property of any kind you did not already	/ list?				
Example	es: Season tickets, country club membership					
<b>Ø</b> No	Olive apparitie				\$	
	s. Give specific symmetries				\$	
					\$	
	e dollar value of all of your entries from Part 7. Write	that number he	ara	->	\$	
54. Add the	e donar value of all of your entries from Fast 7. white	t that mumber no				
	The state of the s					
Part 8:	List the Totals of Each Part of this For	* § §				
55. Part 1:	Total real estate, line 2			*	\$	
56. <b>Part 2:</b>	Total vehicles, line 5	\$				
57 Part 3:	Total personal and household items, line 15	\$	925.00			
		\$	8.52			
	Total financial assets, line 36	Ψ	***************************************			
	Total business-related property, line 45	ъ				
60. Part 6:	Total farm- and fishing-related property, line 52	\$	······································	-		
61. Part 7:	Total other property not listed, line 54	<b>4</b> \$		-		
62. Total n	personal property. Add lines 56 through 61	\$ <u></u>	933.52	_ Copy personal property total 👈	<b>+</b> \$	933.52
ta						
co Tatal -	of all property on Schedule A/B. Add line 55 + line 62.				\$	933.52
ರತ. <b>I OTAI O</b>	or an property on achedule with Add line 55 1 line 62.					

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F	ll in this in	ıforma	tion to identify your case:			
D	ebtor 1	Suza	anne M Miller-Korstanje			
	ebtor 2 pouse, if filing)			Last Name	**************************************	
			ptcy Court for the: Northern Distri			
C.	ase number f known)			***************************************		☐ Check if this is an amended filing
L					MANINIA MARANDA MA	ameriaca marg
<u>O</u> 1	fficial F	orn	n 106C			
S	ched	lule	e C: The Prop	erty You	Claim as Exemp	04/16
Usii spa	ng the prop ce is neede	erty yo ed, fill o	ou listed on <i>Schedule A/B: Prop</i>	perty (Official Form 106A	gether, both are equally responsible for A/B) as your source, list the property that additional Page as necessary. On the top	you claim as exempt. If more
spe of a reti- limi	cific dollar iny applicatement fur ts the exer	r amoi ible st ids—r mptioi	unt as exempt. Alternatively, atutory limit. Some exemptio nay be unlimited in dollar am	you may claim the full ins—such as those for lount. However, if you nt and the value of the	amount of the exemption you claim. O fair market value of the property beir health aids, rights to receive certain claim an exemption of 100% of fair ma property is determined to exceed that	g exempted up to the amount benefits, and tax-exempt arket value under a law that
	aritik le	ientif	y the Property You Claim	as Exempt	A C-MANAGEMENT PROMOTOR PROMOTOR AND	Programment of the Company of the Co
	You a	re clai re clai	emptions are you claiming? ming state and federal nonbank ming federal exemptions. 11 U	cruptcy exemptions, 11 .S.C. § 522(b)(2)		
			on of the property and line on hat lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Check only one box for each exemption.	
	Brief descriptio		Furniture/appliances	\$ <u>200.00</u>	<b>Ø</b> \$ <b>200.00</b> □ 100% of fair market value, up to	735IL CS 5/12-1001(b)
	Line from Schedule		6		any applicable statutory limit	
	Brief descriptio	ιų:	Electronics	\$ 300.00	<b>∡</b> 1	735 IL CS 5/12-1001(b)
	Line from Schedule		7		☐ 100% of fair market value, up to any applicable statutory limit	
	Brief descriptio	n:	Clothes	\$ <b>425.00</b>	<b>2</b>	735 IL CS 5/12-1001(b)
	Line from Schedule		_11		100% of fair market value, up to any applicable statutory limit	
3.	(Subject to No Pes. D	o adjus		years after that for case:	s filed on or after the date of adjustment.  1,215 days before you filed this case?	)

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Debtor 1

Suzanne M Miller-Korstanje

Ouzanne w while - Korstanje	
First Name Missile Name Leas Name	Case number (if known)
	The second secon

#### Part 2: Ad

#### Additional Page

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Check only one box for each exemption	
Brief description:	\$		
Line from Schedule A/B:		100% of fair market value, up to any applicable statutory limit	
Brief description:	\$		No.
Line from Schedule A/B:	The state of the s	100% of fair market value, up to any applicable statutory limit	
Brief description:	\$	<b>□</b> \$	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief descríption:	\$	<b>□</b> \$	
Line from Schedule A/B:		100% of fair market value, up to	
Brief description: ————————————————————————————————————	\$	<b>u</b> s	
Line from Schedule A/B:		☐ 100% of fair market value, up to any applicable statutory limit	
Brief escription:	\$	<b>-</b> s	
ine from Cchedule A/B:		100% of fair market value, up to any applicable statutory limit	
	\$	<b>Q</b> \$	
ne fromchedule A/B;		100% of fair market value, up to any applicable statutory limit	
	\$	<b>\$</b>	
ne from thedule A/B:		100% of fair market value, up to any applicable statutory limit	
ief scription:		<b>Q</b> \$	
ne from hedule A/B:		100% of fair market value, up to any applicable statutory limit	
ef scription: \$		<b>ū</b> \$	
e from hedule A/B:		100% of fair market value, up to any applicable statutory limit	
ef cription: \$	Part of the state	<b>1</b> \$	
e from pedule A/B;		100% of fair market value, up to any applicable statutory limit	
of cription:		<b>]</b> \$	
efrom edule A/B:		100% of fair market value, up to any applicable statutory limit	

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Fill in this information to identify your o	:ase;							
Debtor 1 Season W.	Kerller horstand							
First Name Midi Debtor 2 (Seques if filing)	(Socurse if filing) Fire Many							
	lle Name Last Name							
United States Bankruptcy Court for the	United States Bankruptcy Court for the Achtern District of Illero							
Case number (If known)								
				if this is an				
			ameno	ded filing				
Official Form 106D								
Schedule D: Credito	rs Who Have Claims Secu	red by Pro	nartv	40/45				
Be as complete and accurate as possible	e If two married popula are filling to make a but			12/15				
information. If more space is needed, co additional pages, write your name and c	by the Additional Page, fill it out, number the entries	equally responsibles, and attach it to the	e for supplying correction of the top of the	t fanv				
Tadamonia pages, write your riame and c	ase number (If Known).			· •,				
1. Do any creditors have claims secured	by your property?							
No. Check this box and submit this fo	orm to the court with your other schedules. You have not	thing else to report o	n this form					
Yes. Fill in all of the information below	٧.	aming olde to report o	11 0113 101111.					
Part 1: List All Secured Claims								
Part 1: List All Secured Claims								
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C				
or each claim, it is one than one creditor	Das a particular claim, liet the other ereditors in Day of	Amount of claim  Do not deduct the	Value of collateral that supports this	Unsecured				
	habetical order according to the creditor's name.	value of collateral.	claim	portion If any				
2.1	Describe the property that secures the claim:	\$		ASSESSMENT OF STREET				
Creditor's Name	- Andread design of the Control of t	2		\$				
Number Street								
	As of the date you file, the claim is: Check all that apply	y.						
	Contingent Unliquidated							
City State ZIP Code	Disputed							
Who owes the debt? Check one.	Nature of lien. Check all that apply.							
Debtor 1 only	An agreement you made (such as mortgage or secured)							
Debtor 2 only	car loan)							
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)							
At least one of the debtors and another	Judgment lien from a lawsuit							
Check if this claim relates to a	Other (including a right to offset)							
community debt  Date debt was incurred								
2.2	Last 4 digits of account number	and transfer the contract of t	a Carly Breside Broke Breside (1982 - 1982 - 1982 - 1982 - 1984 - 1982 - 1984 - 1982 - 1982 - 1982 - 1982 - 1					
Creditor's Name	Describe the property that secures the claim:	\$	\$\$					
o. out to Figure				:				
Number Street				!				
	As of the date you file, the claim is: Check ail that apply.	لسا		,				
□ Contingent								
City State ZIP Code	Unliquidated Disputed			1				
Who owes the debt? Check one.				:				
Debtor 1 only	Nature of lien. Check all that apply.							
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)							
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)							
At least one of the debtors and another	Judgment lien from a lawsuit			:				
☐ Check if this claim relates to a	Other (including a right to offset)	-						
community debt								
Date debt was incurred	Last 4 digits of account number			1				
Add the dollar value of your entries in C	olumn A on this page. Write that number here:	**************************************	adam kan integran kan jamin kan kan kan dan dan dan kan kan kan kan kan kan kan kan kan k	: The second se				

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Document Page 24 of 67 Debtor Column A Column B Column C **Additional Page** Amount of claim Value of collateral Unsecured Part 1: After listing any entries on this page, number them beginning with 2.3, followed that supports this Do not deduct the portion by 2.4, and so forth. value of collateral. claim If any Describe the property that secures the claim: Creditor's Name Number As of the date you file, the claim is: Check all that apply. Contingent ZIP Code Unliquidated Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) _ ☐ Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name Number Street As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated State ZIP Code Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only car loan) Debtor 1 and Debtor 2 only Statutory lien (such as tax lien, mechanic's lien) At least one of the debtors and another ☐ Judgment lien from a lawsuit Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number Describe the property that secures the claim: Creditor's Name As of the date you file, the claim is: Check all that apply. Contingent Unliquidated ZIP Code □ Disputed Who owes the debt? Check one. Nature of lien. Check all that apply. Debtor 1 only An agreement you made (such as mortgage or secured) Debtor 2 only ☐ Statutory lien (such as tax lien, mechanic's lien) Debtor 1 and Debtor 2 only Judgment lien from a lawsuit At least one of the debtors and another Other (including a right to offset) Check if this claim relates to a community debt Date debt was incurred Last 4 digits of account number

Write that number here:

Add the dollar value of your entries in Column A on this page. Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

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502	me	Undelle	a-bossinge
First Name	Middle Name	Last Name	

Part 2	*****	ist Others to Be Notific	Last Name	That You Alread	
Use this agency you have	s page is tryin	only if you have others to b	e notified about debt you owe to of the debts that	your bankruptcy for someone else, list the	a debt that you already listed in Part 1. For example, if a collection ne creditor in Part 1, and then list the collection agency here. Similarly, if list the additional creditors here. If you do not have additional persons to
					On which line in Part 1 did you enter the creditor?
Nam	ne				Last 4 digits of account number
					·······
Num	iber	Street			
	- h/				_
City			State	ZIP Code	-
	nd different bles gammer b	ermen der di kanas (1873 in sana kali 138 majir nana kangan di pelebahan di dibindi di Sebelah Mebilikah di Sebela	manus	ATT COUR	
					On which line in Part 1 did you enter the creditor?
Nam	ie				Last 4 digits of account number
Num	ber	Street			-
			***************************************		•
City			State	ZIP Code	-
************		rikiningan tanggan tanggan panggan pan	derrechten der bestehen der Geschen von der der verschen Sterken der	ett trintin etgi-marguney kipungs kitalisti katikratin tuncisi na etunek epitaping	On which line in Part 1 did you enter the creditor?
J Nam	e		***************************************		Last 4 digits of account number
					and a digital of abboard manager
Num	ber	Street			-
					_
70 70 70 70 70 70 70 70 70 70 70 70 70 7					
City	Avetabetaties is	સ્તર્જિક પ્રેમ સામાના સ્થાપ કરે છે. જે જે મામ સામાના સ્થાપ કરે છે. આ માટે જે જે આ મામ સામાના સામાના સામાના સામ સ્તર્જિક જે જે મામ સામાના	State	ZIP Code	PROPERTY CONSTRUCTION OF THE PROPERTY OF THE P
					On which line in Part 1 did you enter the creditor?
Name	9		y my man AV and	AR-100-101-101-101-101-101-101-101-101-10	Last 4 digits of account number
Numl		Street			
NUMBE	Jei	Street			
City	<del></del>		State	ZIP Code	
	et et et en enemen	nutra ta sela una companyati and a titopinista y ginetifa a ying mga manusa can an wasaname sta ma	estres anne demonstrad en end est est tratation in primi	ent anti-ment of market of the course of the compression of the contract of the contract of the course of the cour	
Name	<u> </u>		······································		On which line in Part 1 did you enter the creditor?
rvairie	•				Last 4 digits of account number
Numb	er	Street			
City			State	ZIP Code	
	****************	telegat (1 de timbre) des protocios for la critica de sucrescando poestico partico partico particolar como com		all a seg und comprehends a dermit for leatherful a definition of unit on the development restrict	On which line in Part 1 did you enter the creditor?
 Name					Last 4 digits of account number
Numb	er	Street			

City

ZIP Code

State

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	Fill in this information to identify your case:					
	Suzanno M Miller Karatania					
	Debtor 1 Suzanne M Miller-Korstanje  First Name Middle Name					
	Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name				
	Inited States Bankrunta, Court for the Miles					
	United States Bankruptcy Court for the: Northern Distri	ct of Illinois				
	Case number (If known)					eck if this is an ended filing
<u>C</u>	Official Form 106E/F					
S	chedule E/F: Creditors	Who Have Unsecui	red Clair	ns		12/15
A/ cre ne an	e as complete and accurate as possible. Use Past the other party to any executory contracts or B: Property (Official Form 106A/B) and on Scheeditors with partially secured claims that are liseded, copy the Part you need, fill it out, numbey additional pages, write your name and case remarks.  List All of Your PRIORITY Unsecu	dule G: Executory Contracts and United in Schedule D: Creditors Who Harthe entries in the boxes on the left. umber (if known).	i a ciaim. Also li expired Leases (	st executory co Official Form 1	ontracts on 3 06G). Do not	S <i>chedule</i> t include any
	Do any creditors have priority unsecured claim  No. Go to Part 2.  Yes.  List all of your priority unsecured claims. If a ceach claim listed, identify what type of claim it is nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of the continuation	preditor has more than one priority unse f a claim has both priority and nonpriori claims in alphabetical order according	ty amounts, list th	at claim here an	d show both	priority and
	(For an explanation of each type of claim, see the	instructions for this form in the instruction	a particular cialiri nn hooklet i	, usi the other cr	editors in Pa	nt 3.
	••	The state of the s	on booklet.)	Total claim	Dalasia.	
	1			TOTAL CIALLE	Priority amount	Nonpriority amount
2.1						
W	Priority Creditor's Name	Last 4 digits of account number		\$	\$	\$
		When was the debt incurred?				
	Number Street					
		As of the date you file, the claim is:	Check all that anniv			
	City State 7IP Code	☐ Contingent	oricon an mar appry			
	, Satur El COGC	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	<i>5pata</i>				
	Debtor 2 only	Type of PRIORITY unsecured clair	n:			
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Domestic support obligations				
		Taxes and certain other debts you ow	e the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury wh				
	Is the claim subject to offset?	intoxicated				
	□ No	Other, Specify				
	Yes	e de trada de como como estra de mesos que con estado en como como como como como como como estado en como de Contrada de como como como como como como como com				
2.2			Tell or treet for the Book or a series accompany of a great year garge		teranti tartetta eta agity a assa agei	
	Priority Creditor's Name	Last 4 digits of account number		Ď	\$	\$
	Number Street	When was the debt incurred?				
		As of the date you file, the claim is: 0	Spools all these area.			
			леск ан тлат арргу			
	City State ZIP Code	Contingent Unliquidated	*			
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only					
	Debtor 2 only	Type of PRIORITY unsecured claim	ı:			
	Debtor 1 and Debtor 2 only	☐ Domestic support obligations				
	☐ At least one of the debtors and another	Taxes and certain other debts you owe	the government			
	☐ Check if this claim is for a community debt	Claims for death or personal injury whi	le vou were			
	·	intoxicated				
	Is the claim subject to offset?  No Yes	Ofher. Specify				
	- 105					

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Part 1:

Suzanne M Miller-Korstanje

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Debtor 1

Middle Name

e	l.ast	Na

Your PRIORITY Unsecured Claims — Continuation Page

Case number (if known)_

4	After listing any entries on this page, number th	em beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Щ.	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply Contingent	۸.		
	City State ZIP Code	Unliquidated Disputed			
	Who incurred the debt? Check one.				
	Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury white you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify			
	is the claim subject to offset?				
	☐ No ☐ Yes				
	Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State 765 Code	Contingent			
	. Justic VIII Code	Unliquidated Disputed			
	Who incurred the debt? Check one.	Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
	At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
	·	Other. Specify			
	Is the claim subject to offset?				
	□ No				
7	Yes		Phonony Section Section Section 1 and 1		e.
	Priority Creditor's Name	Last 4 digits of account number	\$ \$		\$
	Number Street	When was the debt incurred?			
		As of the date you file, the claim is: Check all that apply.			
	City State 7/D Code	Contingent			
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one.	☐ Disputed			
	Debtor 1 only	Type of PRIORITY unsecured claim:			
	Debtor 2 only	Domestic support obligations			
	Debtor 1 and Debtor 2 only  At least one of the debtors and another	Taxes and certain other debts you owe the government			
		Claims for death or personal injury white you were			
	☐ Check if this claim is for a community debt	intoxicated  Other. Specify		*****************************	en e
	Is the claim subject to offset?	The second secon			
	□ No □ Yes				

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Debtor 1

Suzanne M Miller-Korstanje

suzanne	IN MINET-LO	Starije
First Name	Middle Name	Last Name

3. Do any creditors have nonpriority unsecured claims against you?

Case number (if known)____

ella de la companya della companya della companya de la companya della companya d	23711770	481111	255
	F 17	· 20	2.
381 A		M	24

List All of Your NONPRIORITY Unsecured Claims

3. L	o any creditors have nonphoney an	13004104					
	No. You have nothing to report in the Yes	nis part. Sut	omit this form to	the court with your other schedules.			
4. L	ist all of your nonpriority unsecured on priority unsecured claim, list the crescured claim, list the cresculed in Part 1, If more than one cre	ditor separi ditor holds	the alphabetic ately for each cl a particular clair	al order of the creditor who holds e aim. For each claim listed, identify who n, list the other creditors in Part 3.If yo	each claim. If a creditor has a at type of claim it is. Do not li ou have more than three non	more th ist clain priority	an one ns already unsecured
С	laims fill out the Continuation Page of	ran 2.				Total	claim
4.1	Avant			Last 4 digits of account number	4 5 5 5	\$	8,000.00
	Nonpriority Creditor's Name			When was the debt incurred?	05/01/2015	*	
	222 N. LaSalle Street #1700			Assists A02 fric dept successes.			
	Number Street		60601				
	Chicago	State	ZIP Code	As of the date you file, the claim	is: Check all that apply.		
	City	outo		Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only						
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsec	ured claim:		
	At least one of the debtors and another	er		Student loans			
				Obligations arising out of a sepa	aration agreement or divorce		
	☐ Check if this claim is for a comm	unity debt		that you did not report as priority	y claims		
	Is the claim subject to offset?			Debts to pension or profit-sharing Other. Specify loan	ng plans, and other similal debts		
	□ No			Other. Specify Ioan			
	Yes				and the second and the second second and the second	,,	
4.2	AT&T Uverse	, , m, , m, , m, m, m, , , , , , , , ,		Last 4 digits of account number	r <u>5 0 6 4</u>	\$	289.00
	Nonpriority Creditor's Name			When was the debt incurred?	07/01/2012		
	P.O. Box 3097						
	Number Street			As of the date you file, the clair	n is: Chack all that anniv		
	Bloomington	IL	61702	As of the date you file, the clair	II IS. Check all that apply.		
	City	State	ZIP Code	☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			Type of NONPRIORITY unsec	rured claim:		
	Debtor 1 and Debtor 2 only				Juica Cimini		
	At least one of the debtors and anoth	er		<ul><li>Student loans</li><li>Obligations arising out of a sep</li></ul>	eration agreement of divorce		
	Check if this claim is for a comm	nunity debt		Obligations arising out of a sep that you did not report as priori	ty claims		
				Debts to pension or profit-shari	ng plans, and other similar debts	;	
	Is the claim subject to offset?			Other Specify cable netw	vork		
	☐ No ☐ Yes						
r	Yes The Control of the Control of th	.,	and the state of t		and and the second progression of the second se	. 8	
4.3	Arlington Pathology			Last 4 digits of account number		\$	46.00
	Nonpriority Creditor's Name			When was the debt incurred?	07/01/2016		
	520 E 22nd Street						
	Number Street	IL.	60148	Pate all a state	in in Charle all that cante		
	Lombard City	State	ZIP Code	As of the date you file, the clai	m is: Check all trial apply.		
	•			☐ Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			Disputed			
	Debtor 2 only			w	cured claim:		
	<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors and anoth</li></ul>	her		Type of NONPRIORITY unse	Cuicu Ciailii.		
				Student loans	p		
	☐ Check if this claim is for a comm	munity debt	ł.	Obligations arising out of a set that you did not report as prior	paration agreement or divorce ity claims		
	Is the claim subject to offset?			Debts to pension or profit-shall	ring plans, and other similar debt	s	
	☐ No			Other, Specify medical		-	
	☐ Yes			· · · · · · · · · · · · · · · · · · ·			

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Debtor 1

Suzanne M Miller-Korstanje

ouzanne ivi	Miller-K	Jistanje
First Name	Middle Name	Last Name

Case number (if known)		
	Case number	(if known)

Afi	ter listing any entries on this page, number	them beginn	ing with 4.4, followed by 4.5, and so forth.	Total claim
4	AT&T Mobility		Last 4 digits of account number 3 7 6 9	_{\$} 548.00
	Nonpriority Creditor's Name P.O. Box 981002		When was the debt incurred? 07/01/2012	
	Number Street	0000	As of the date you file, the claim is: Check all that apply.	
	Boston Ma City State	0229 ZIP Code		
	on,		Unliquidated	
	Who incurred the debt? Check one.		☐ Disputed	
	Debtor 1 only		Time of MOMPHODITY upper und doing	
	Debtor 2 only Debtor 1 and Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	Check if this claim is for a community d	ebt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other Specify telephone	
	☐ No ☐ Yes			
5	Best Buy		Last 4 digits of account number 2 2 7 2	\$ <u>772.00</u>
	Nonpriority Creditor's Name P.O. Box 469100		When was the debt incurred? 05/01/2015	
	Number Street		As of the date you file, the claim is: Check all that apply.	
	Escondido Ca		16	
	City State	ZIP Code	Contingent Unliquidated	
	Who incurred the debt? Check one.		Disputed	
	Debtor 1 only			
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		☐ Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a community d	ebt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?		Other, Specify household items	
	☐ No			
	Yes			
6	Circle Hill A december		Last 4 digits of account number 1 0 7	\$_5,000.00
	Circle Hill Apartments Nonpriority Creditor's Name		40/04/2014	
	415 E. Circle Hill #106		When was the debt incurred? 12/01/2011	
	Number Street Arlington Hts II	6000		
	City State	ZIP Code		
	Who incurred the debt? Check one.		☐ Unliquidated☐ Disputed	
	Debtor 1 only		- Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and another		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community d	ebt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
	is the claim subject to offset?		Other. Specify past due from eviction	
	☐ No			
	Yes			

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Debtor	1	

Suzanne M Miller-Korstanje

	111 11111111111111111111111111111111111	(a) (i) C
st Name	Middle Name	Last Name

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Case number (if known)	
------------------------	--

Pari 2:

7					Total claim
First Prem Nonpriority Credite	eir de Name			Last 4 digits of account number 0 5 8 3	s 1,103.00
5300 S. 6ti				When was the debt incurred? 07/01/2015	3 1,700.00
Springfield	eet	II	62703	As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Who incurred	he debt? Check one.			Unliquidated	
Debtor 1 onl				☐ Disputed	
Debtor 2 onl				Type of NONPRIORITY unsecured claim:	
Debtor 1 and	Debtor 2 only  If the debtors and anot	ī		☐ Student loans	
				Obligations arising out of a separation agreement or divorce that	
	s claim is for a comi	nunity debt		you did not report as phority claims	
Is the claim su	ject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify <b>Clothes</b>	
□ No □ Yes					
, , , ,					
First step/B	ink Nevada		4	Last 4 digits of account number 2 7 9 0	s_2,429.00
	Creek Pkwy #	2200		When was the debt incurred? 05/01/2015	
Brooklyn Ce	nter	Mn	55430	As of the date you file, the claim is: Check all that apply.	
City		State	ZIP Code	Contingent	
Who incurred ti	e debt? Check one.			☐ Unliquidated	
Debtor 1 only				Disputed	
Debtor 2 only				Type of NONPRIORITY unsecured claim:	
Debtor 1 and	lebtor 2 only			Student loans	
	the debtors and anoth			Obligations arising out of a separation agreement or divorce that	
Check if this	claim is for a comm	unity debt		you do not report as priority claims	
Is the claim sub	ect to offset?			Debts to pension or profit-sharing plans, and other similar debts	
☐ No				Other Specify household items	
Yes					
					050.00
Fingerhut Nonpriority Creditor's				Last 4 digits of account number 8 4 4 8	\$656.00
16 McLeland				When was the debt incurred? 01/01/2014	
Number Stree					
St. Cloud		Mn	56303	As of the date you file, the claim is: Check all that apply.	
Ony		State	ZIP Code	Contingent	
Who incurred the	debt? Check one.			☐ Unliquidated ☐ Disputed	
Debtor 1 only				Cal Disputed	
Debtor 2 only				Type of NONPRIORITY unsecured claim:	
Debtor 1 and D	btor 2 only ne debtors and another			Student loans	
				Obligations arising out of a separation agreement or divorce that	
	laim is for a commu	nity debt		you did not report as priority claims	
ls the claim subje	ct to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify household items	
□ No				W Uther, Specify IDUSERION ITAMS	

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Debtor 1

Suzanne M Miller-Korstanje

est Name	Middle Name

Case number (if known)_

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133		a ti	B 4
273	1000	e l'est	Service.
1.43			

Afte	er listing any entries on this page, nu	mber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim		
13	Giiny's			Last 4 digits of account number 2 0 1 6	_{\$} 475.00		
	Nonpriority Creditor's Name 223 W. Jackson Blvd #700			When was the debt incurred? 07/01/2015			
	Number Street Chicago	11	60606	As of the date you file, the claim is: Check all that apply.			
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed			
	Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only			Student loans			
	At least one of the debtors and another			<ul> <li>Obligations arising out of a separation agreement or divorce that</li> </ul>			
	Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
	is the claim subject to offset?			Other. Specify household			
	☐ No ☐ Yes						
14				0 4 7 0			
	Illinois Tollway			Last 4 digits of account number 8 1 7 0	\$ <u>1,360.00</u>		
	Nonpriority Creditor's Name 111 W. Jackson Blvd #600			When was the debt incurred? 01/07/2012			
	Number Street Chicago	II	60604	As of the date you file, the claim is: Check all that apply.			
	City	State ZIP Code Contingent					
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			Disputed			
	Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only			☐ Student loans			
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that			
	Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			Other. Specify tollway fines			
	☐ No						
	☐ Yes						
15					s 140.00		
	K. Jordan			Last 4 digits of account number 8 4 4 8	*		
	Nonpriority Creditor's Name P.O. Box 2809			When was the debt incurred? 01/01/2016			
	Number Street  Monroe	Wi	53566	As of the date you file, the claim is: Check all that apply.			
	City	State	ZIP Code	Contingent			
	Who incurred the debt? Check one.			Unliquidated			
	Debtor 1 only			☐ Disputed			
	Debtor 2 only			Type of NONPRIORITY unsecured claim:			
	Debtor 1 and Debtor 2 only			Student loans			
	At least one of the debtors and another			Obligations arising out of a separation agreement or divorce that			
	☐ Check if this claim is for a commu	nity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts			
	Is the claim subject to offset?			Other Specify shoes			
	☐ No ☐ Yes						

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Debtor 1

Suzanne M Miller-Korstanje

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Case number (if known)_

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Aft	er listing any entries on this page, n	umber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
16	Long Grove Fire Dept			Last 4 digits of account number 6 0 1 6	s 802.00
	Nonpriority Creditor's Name P.O. Box 6253			When was the debt incurred? 07/01/2016	\$002.00
	Number Street Carol Stream	11	60197	As of the date you file, the claim is: Check all that apply.	
	City  Who incurred the debt? Check one.	State	ZIP Code	Contingent Unliquidated	
	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only			☐ Disputed  Type of NONPRIORITY unsecured claim:  ☐ Student loans	
	☐ At least one of the debtors and anothe☐ Check if this claim is for a commuls the claim subject to offset?☐ No☐ Yes			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify medical</li> </ul>	
17	Massey's			Last 4 digits of account number 9 4 1 1	s234.00
	Nonpriority Creditor's Name P.O. Box 2822			When was the debt incurred? 01/07/2015	PARTY OF THE PARTY
	Number Street	) A C	50500	As of the date you file, the claim is: Check all that apply.	
	Monroe City	Wi State	<b>53566</b> ZIP Code	Contingent	
	Who incurred the debt? Check one.  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors and another  □ Check if this claim is for a communication.			☐ Unfiquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?  No Yes	my danc		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify shoes	
18	Montgomery Ward Nonpriority Creditor's Name	****		Last 4 digits of account number 2 2 3 7	\$ <u>477.00</u>
	223 W. Jackson Blvd #700		***************************************	When was the debt incurred? 05/01/2015	
	Chicago	il	60606	As of the date you file, the claim is: Check all that apply.	
	Who incurred the debt? Check one.	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
	✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	Check if this claim is for a commur  Is the claim subject to offset?	ity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify computer	
	☐ Yes				

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Debt	OF 1 Suzanne M Miller-K	orstanje	nie	Case number (# known)	
Pai	712: Your NONPRIORITY			sation Page	
Afte	er listing any entries on this pa	ge, number the	em beginning with	4.4, followed by 4.5, and so forth.	Total claim
19	Columbia College Nonpriority Creditor's Name			Last 4 digits of account number 2 7 2 2	\$_3,000.00
	600 S. Michigan Ave			When was the debt incurred? 06/01/1995	
	Number Street Chicago		60605	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check or	ne		Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☑ Student loans	
	At least one of the debtors and a	nother		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a co	mmunity debt		you did not report as priority claims	
	Is the claim subject to offset?	•		Debts to pension or profit-sharing plans, and other similar debts  Other. Specify	
	☐ No			Cities, Specify	
	☐ Yes				
20				Last 4 digits of account number 1 3 5 3	s 27.00
	Publisher's Clearing House Nonpriority Creditor's Name			Last 4 digits of account fulfiber 1 0 0 0	\$ 27.00
	P.O. Box 6344			When was the debt incurred? 01/07/2016	
	Number Street Harlan	la	51593	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check or	ie.		☐ Disputed	
	Debtor 1 only			T (NONDPODITY	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and a	nother		Student loans	
	_			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim is for a co	mmunity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify household item	
	□ No				
	Q Yes				
21					£ 254.00
	Roaman's			Last 4 digits of account number 5 5 1 8	\$234.00
	Nonpriority Creditor's Name	······································	<del></del>	When was the debt incurred? 05/01/2015	
	P.O. Box 659728			When was the debt incurred? U5/01/2015	
	Number Street San Antonio	Tx	78265	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
				Unliquidated	
	Who incurred the debt? Check or	ie.		☐ Disputed	
	Debtor 1 only			Tune of NONDBIODITY unaccured elem-	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and a	nother		Student loans	
	☐ Check if this claim is for a co			Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	

☐ No ☐ Yes

Is the claim subject to offset?

Other. Specify shoes

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Debtor 1

Suzanne M Miller-Korstanje

First Name

Case number (if known)

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Af	ter listing any entries on this page,	number the	em beginning wit	h 4.4, followed by 4.5, and so forth.		Total claim
22	St. Gregory Credit Union Nonpriority Creditor's Name 655 Deerfield Rd #100-300  Number Street Deerfield II 60015  City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 4 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset? No Yes  Stoneberry Nonpriority Creditor's Name P.O. Box 2820  Number Street Monroe Wi 53566  City State ZIP Code  Who incurred the debt? Check one.		Last 4 digits of account number	r <u>9 7 3 3</u>	\$ <u>8,430.00</u>	
	, ,			When was the debt incurred?	07/01/2001	
		11	60015	As of the date you file, the clain	n is: Check all that apply.	
				Contingent		
	Who incurred the debt? Check one.			<ul><li>Unliquidated</li><li>Disputed</li></ul>		
	Debtor 1 only			☐ Disputed		
				Type of NONPRIORITY unsecu	red claim:	
	VIII A	er		Student loans		
	Check if this claim is for a comm	unity debt		Obligations arising out of a sepa you did not report as priority clai	ims	
				Debts to pension or profit-sharin  Other, Specify loan-wage	g plans, and other similar debts	
	□ No			Other, Specify Today-Wage	gamisiment order	
	☐ Yes					
20	1					
23	Stoneherry			Last 4 digits of account number	9 4 1 1	s 330.00
				***	05/07/2016	<u> </u>
				When was the debt incurred?	03/07/2016	
		Wi	53566	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent		
	Who incurred the debt? Check one.			Unliquidated Disputed		
				·		
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecur	red claim:	
	At least one of the debtors and another	er		Student loans		
	Check if this claim is for a comm	unity debt		Obligations arising out of a separ you did not report as priority clair	ns	
	Is the claim subject to offset?	•		Debts to pension or profit-sharing  Other. Specify household i	plans, and other similar debts	
	☐ No			• Other, Specify 110d3e11010 1	[6:1]	
	☐ Yes					
24						s 7,436.00
·	Triad Auto			Last 4 digits of account number	1 0 0 0	\$ 7,430.00
	Nonpriority Creditor's Name			When was the debt incurred?	07/01/2001	
	P.O. Box 9001 Number Street			-	WARLAND AND AND AND AND AND AND AND AND AND	
	Weastbury	Ny	11590	As of the date you file, the claim	is: Check all that apply.	
	City	State	ZIP Code	Contingent Unliquidated		
	Who incurred the debt? Check one.			Disputed		
	Debtor 1 only Debtor 2 only					
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecure		
	At least one of the debtors and anothe	r		<ul><li>Student loans</li><li>Obligations arising out of a separa</li></ul>	ation agreement or divorce that	
	Check if this claim is for a commu	ınity debt		you did not report as priority claim	ns	
	Is the claim subject to offset?			<ul><li>□ Debts to pension or profit-sharing</li><li>☑ Other, Specify <u>repossessed</u></li></ul>	plans, and other similar debts	
	□ No				DOIGHOU	
	☐ Yes					

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Debtor 1

Suzanne M Miller-Korstanje

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er resung any entries on this	page, number them beginn	ing with 4.4, followed by 4.5, and so forth.	Total clair
Victoria's Secret		Last 4 digits of account number 3 2 0 7	s 560.
Nonpriority Creditor's Name P.O. Box 659728		When was the debt incurred? 07/01/2016	\$
Number Street San Antonio	Tx 7826	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Chec  ✓ Debtor 1 only  □ Debtor 2 only  □ Debtor 1 and Debtor 2 only  □ At least one of the debtors an  □ Check if this claim is for a  Is the claim subject to offset?	State ZIP Code k one. d another community debt	Contingent Unfiquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Clothes	
☐ No ☐ Yes		Gran. Openly Glotifus	
Kohl's		Last 4 digits of account number 6 1 0 1	\$ 684.
Nonpriority Creditor's Name N56 W 17000 Ridgewoo	od dr.	When was the debt incurred? 02/04/2013	·
Number Street  Monomonee Falls	Wi 53051	As of the date you file, the claim is: Check all that apply.	
Who incurred the debt? Check Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this claim is for a street claim subject to offset? No	another	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify household item & clothes	
DId Navy onpriority Creditor's Name		Last 4 digits of account number 9 9 0 3	\$200.0
P.O. Box 965005		When was the debt incurred? 07/01/2016	
Orlando	FI 32896	As of the date you file, the claim is: Check all that apply.	
ity  Who incurred the debt? Check of  Debtor 1 only	State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed	
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and		Type of <b>NONPRIORITY</b> unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a c s the claim subject to offset? No Yes	ommunity debt	you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other Specify Clothes	

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Debtor 1

Suzanne M Miller-Korstanje

Case number (#	known)
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After listing	any entries on this page, nu	mber the	m beginning with	4.4, followed by 4.5, and so forth.	Total claim
28 Verve				Last 4 digits of account number 2 8 1 9	s 654.00
	ty Creditor's Name Box 8099			When was the debt incurred? 07/01/2014	
Number News	Street	De	19714	As of the date you file, the claim is: Check all that apply.	
City	curred the debt? Check one.	State	ZIP Code	Contingent Unliquidated Disputed	
Deb	tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another eck if this claim is for a communication subject to offset?	nity debt		Type of NONPRIORITY unsecured claim:  Student loans  Obligations arising out of a separation agreement or divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts  Other. Specify clothes	
Nonpriori	inancial ty Creditor's Name			Last 4 digits of account number 2 7 2 2  When was the debt incurred? 09/24/2015	\$_8,000.00
Number	N. seven Oaks Dr Street			As of the date you file, the claim is: Check all that apply.	
Deb	curred the debt? Check one. tor 1 only tor 2 only tor 1 and Debtor 2 only east one of the debtors and another		37922 ZIP Code	Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the c	laim subject to offset?			Other. Specify	e 0.00
Nonpriori	ty Creditor's Name			Last 4 digits of account number	Ψ
				When was the debt incurred?	
Number	Street			As of the date you file, the claim is: Check all that apply.	
Deb	curred the debt? Check one. ofor 1 only ofor 2 only ofor 1 and Debtor 2 only	State	ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed  Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Che	east one of the debtors and another eck if this claim is for a commu claim subject to offset?			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>Debts to pension or profit-sharing plans, and other similar debts</li> <li>Other. Specify</li> </ul>	

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Debtor 1

Suzanne M Miller-Korstanje

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Case number (if known)

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#### List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

AFINI Name			On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 3099			Line 2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		<del>*************************************</del>	☑ Part 2: Creditors with Nonpriority Unsecured Claims
Bloomington	Ì	61702	Last 4 digits of account number 5 0 6 4
City	State	ZIP Code	
EOS CA	···-		On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 981002			Line 4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street		***************************************	Part 2: Creditors with Nonpriority Unsecured
D 4			
Boston City	Ma State	02298 ZIP Code	Last 4 digits of account number 3 7 6 9
MSB Name	***		On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 16755			Line 9 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Austin	Tx	78761	4.4.6.7
City	State	ZIP Code	Last 4 digits of account number 1 1 6 7
CCB Name			On which entry in Part 1 or Part 2 did you list the original creditor?
5300 S. 6th Street			Line 10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
	***************************************		Claims
Springfield City	State	<b>62703</b> ZIP Code	Last 4 digits of account number 0 5 8 3
First step	·		On which entry in Part 1 or Part 2 did you list the original creditor?
6300 Shingle Creek Pkwy			Line 11 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	~~~~~~~		Part 2: Creditors with Nonpriority Unsecured
			Claims
Brooklyn Center	Mn State	55430 ZIP Code	Last 4 digits of account number 2 7 9 0
Jefferson Capital			On which entry in Part 1 or Part 2 did you list the original creditor?
Name		***************************************	and for the state of the state
16 McLeland Rd Number Street			Line 12 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
St. Cloud	Mn State	56303 ZIP Code	Last 4 digits of account number 8 4 4 8
Merchant Credit Guide			On which entry in Part 1 or Part 2 did you list the original creditor?
223 W. Jackson Blvd			Line 13 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street #700			Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	ll	60604	Cigniis
City	State	ZIP Code	Last 4 digits of account number 2 0 1 6

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Debtor 1

Suzanne M Miller-Korstanje

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List Others to Be Notified About a Debt That You Already Listed Partie SH 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Arnold Scott Line 14 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims 111 W. Jackson Blvd Number Last 4 digits of account number 8 1 7 0 #600 60604 11 Chicago State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Merchant Credit Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured 223 W. Jackson Blvd Claims #700 Last 4 digits of account number 2 2 3 7 60606 11 Chicago ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Jay Levy Line 22 of (Check one): Deart 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured 655 Deerfield Rd Street Claims #100-300 Last 4 digits of account number 9 7 3 3 60015 Н Deerfield State On which entry in Part 1 or Part 2 did you list the original creditor? **Debt Recovery Solutions** Line 24 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured P.O. Box9001 Claims Last 4 digits of account number 1 0 0 0 11590 NY Westbury City On which entry in Part 1 or Part 2 did you list the original creditor? **MCM** Line 8 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Name Part 2: Creditors with Nonpriority Unsecured 2365 Northside Dr Number Claims Suite 300 Last 4 digits of account number 2 2 6 7 92108 Ca San Diego 7IP Code On which entry in Part 1 or Part 2 did you list the original creditor? **D&A Services** Line 7 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured 1400 E. Touhy Ave Number Claims Suite G2 Last 4 digits of account number 9 1 7 1 60018 П **Des Plaines** ZiP Code State On which entry in Part 1 or Part 2 did you list the original creditor? Merchant Credit Guide Line 18 of (Check one): Part 1: Creditors with Priority Unsecured Claims 223 W. Jackson Blvd Part 2: Creditors with Nonpriority Unsecured Street #700

Chicago

60604

7IP Code

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State

Last 4 digits of account number 2 0 1 6

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Debtor 1

Suzanne M Miller-Korstanje

Case number (if known)_

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Your NONPRIORITY Unsecured Claims — Continuation Page

listing any entries on this	page, number them be	eginning with	4.4, followed by 4.5, and so forth.	Total clai
Coomenity			Last 4 digits of account number 9 1 7 1	ş <u>716</u>
Nonpriority Creditor's Name P.O. Box 182273			When was the debt incurred? 07/01/2015	
P.O. BOX 1822/3 Number Street			<ul> <li>As of the date you file, the claim is: Check all that apply.</li> </ul>	
Columbus		43218	The said.	
City	State Z	IP Code	☐ Contingent ☐ Unliquidated	
Who incurred the debt? Chec	ck one.		☐ Disputed	
Debtor 1 only				
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
<ul><li>Debtor 1 and Debtor 2 only</li><li>At least one of the debtors a</li></ul>	another		Student loans	
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for	a community debt		Debts to pension or profit-sharing plans, and other similar debts	
is the claim subject to offset	t?		Other. Specify clothes	
□ No □ Yes				
Cradit One			Last 4 digits of account number 0 8 9 9	s <u>637</u>
Credit One Nonpriority Creditor's Name		***************************************	When was the debt incurred? 05/01/2015	
2365 Northside Dr #30	00		When was the debt incurred? 05/01/2015	
Number Street	C	92108	As of the date you file, the claim is: Check all that apply.	
San Diego	Ca State 2	92 100 (IP Code	Contingent	
ON			☐ Unliquidated	
Who incurred the debt? Che	eck one.		☐ Disputed	
Debtor 1 only			Type of NONPRIORITY unsecured claim:	
Debtor 2 only Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors a	and another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for			you did not report as priority claims	
			Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Household items	
Is the claim subject to offse	er t		Other. Specify Household Items	
☐ No ☐ Yes				
			4 4 6 7	s175
Cook County Dept Re	evenue		Last 4 digits of account number 1 1 6 7	
Nonpriority Creditor's Name P.O. Box 16755			When was the debt incurred? 12/01/2013	
Number Street Auatin	Tx	78761	As of the date you file, the claim is: Check all that apply.	
City		ZIP Code	Contingent	
148	and and		☐ Unliquidated	
Who incurred the debt? Che	eck one.		☐ Disputed	
Debtor 1 only Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only	•		Student loans	
At least one of the debtors			Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for	r a community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offse	-		Other, Specify Parking ticket	
No			Olivi, Opovij	
U No □ ves				

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Debtor 1

Suzanne M Miller-Korstanje

Case number (# known)_

Part 4

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
otal claims	6a. Domestic support obligations	6a.	\$	
rom Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$	
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+\$	
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	
			Total claim	
Total claims	6f. Student loans	6f.	ş <u>11,000.00</u>	
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	
	Other. Add all other nonpriority unsecured claims.  Write that amount here.	6i.	+ s	
	6j. <b>Total.</b> Add lines 6f through 6i.	6j.	\$11,000.00	

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Fill in this information to identify your case:	
Debtor Suzanne M Miller-Korstanje First Name Middle Name Last Name	
Debtor 2 (Spouse If filing) First Name Last Name	
United States Bankruptcy Court for the: Northern District of Illinois	Check if this is an
Case number(If known)	amended filing

#### Official Form 106G

### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Name				
Number	Street		The second secon	
City		State	ZIP Code	
Name				
Number	Street		- 14 year - 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	
City	1877 - 18 - 1879 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 - 1884 -	State	ZIP Code	
Name				
Number	Street			
City		State	ZIP Code	
Name				
Number	Street			
City	And the second s	State	ZIP Code	
5				
Name				
Number	Street			
City		State	ZIP Code	

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Debtor 1

#### Suzanne M Miller-Korstanje

First Name

Middle Name

Last Name

Case number of	if known)
----------------	-----------



#### Additional Page if You Have More Contracts or Leases

Person or company with whom you have the contract or lease

What the contract or lease is for

2						
Nam	e					
Num	ber	Street				
City			State	ZIP Code		
Nan	)e					
Nun	nber	Street				
City			State	ZIP Code		
·_						
Nar	ne					
Nur	nber	Street				
City	7		State	ZIP Code		
Na	me					
Nu	mber	Street				
Cit	У		State	ZIP Code		
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Na	me					
Ni	ımber	Street				
Ci	ty		State	ZIP Code		
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N	ame					
N	umber	Street				
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Ī	Vumber	Street				
į	City		State	ZIP Code		

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	Suzanne M Mil	iler-Korstanie			
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if fil	ling) First Name	Middle Name			
United State	es Bankruptcy Court for th	he: Northern District of I	Last Name		
Case numbe	er	C. Hormen District of I	llinois		
(if known)			Name of the second seco		
			P		
Official	Form 106H				Check if this is a amended filing
					The state of thing
'adabt	Mac LI: LON	r Codebtor	***		
odeptors as	re people or entities	who are also liable for	r any debts you may be	ve. Be as complete and accurate as ion. If more space is needed, copy	12/15
nd number	the entries in the box	ily responsible for sup	plying correct informat	ion. If more space is pooded as	possible. If two married peop
ise number	r (if known). Answer e	every question.	the Additional Page to	ve. Be as complete and accurate as ion. If more space is needed, copy his page. On the top of any Addition	the Additional Page, fill it out,
					mai Pages, write your name an
☑ No	dive any codebtors?	(If you are filing a joint o	case, do not list either sp	DUSE as a codobta :	
☐ Yes			-r	as a codebtor.)	
	io land 0				
Arizona C	alifornia Luci	ou lived in a commun	ity property state as to	ritory? (Community property states a Washington, and Wisconsin )	
M NI= ~	- unorma, idano, Louis	iiana, Nevada, New Me	xico, Puerto Rico. Tevas	ritory? (Community property states a Washington, and Wisconsin.)	nd territories include
INO. G	o to line 3.			vesimgion, and Wisconsin.)	- mondag
res. D	ла your spouse, forme	r spouse, or legal equiv	alent live with you at the	v. a	
☐ No	)	9 9979	with you at the	ume?	
<b>∟</b> Ye:	s. In which community	state or ferritory did you	n 6o		
			n uve?	Fill in the name and current add	troop of that
No					ness of that person.
Nan	me of your spouse, former spo	ouse, or legal equivalent		TORON TO	
Num	ahar		•		
14/318	nber Street				
City		State	Z/P Code	The days.	
City					
n Column 1	I, list all of your code	btors. Do not include			
in Column 1	I, list all of your code ne 2 again as a codel	btors. Do not include otor only if that person	your spouse as a code	otor if your spouse is filing with vo	U. list the name
in Column 1	1, list all of your code ne 2 again as a code (Official Form 106D),	btors. Do not include btor only if that persor , Schedule E/F (Officia	your spouse as a code	otor if your spouse is filing with yo iner. Make sure you have listed the	u. List the person
in Column 1	1, list all of your code ne 2 again as a codek (Official Form 106D), /F, or Schedule G to f	ebtors. Do not include btor only if that persor , Schedule E/F (Officia fill out Column 2.	your spouse as a code	otor if your spouse is filing with yo mer. Make sure you have listed the edule G (Official Form 106G). Use S	u. List the person creditor on chedule D.
n Column 1 shown in lir Schedule D Schedule E	/F, or Schedule G to f	ebtors. Do not include btor only if that persor , Schedule E/F (Officia fill out Column 2.	your spouse as a code	otor if your spouse is filing with yo iner. Make sure you have listed the edule G (Official Form 106G). Use S	u. List the person creditor on chedule D,
n Column 1 shown in lir Schedule D Schedule E	1, list all of your code ne 2 again as a codek (Official Form 106D), /F, or Schedule G to f Your codebtor	ebtors. Do not include btor only if that persor , <i>Schedule E/F</i> (Officia fill out Column 2.	your spouse as a code	edule G (Official Form 106G). Use S	creditor on chedule D,
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In Column 1 shown in lin Schedule D Schedule E/Column 1: Y Name Number City Name Number	/F, or Schedule G to f	fill out Column 2.  State	your spouse as a codel in is a guarantor or cosign is a guarantor or cosign is a guarantor or School in its a guarantor or School is a guarantor or School is a guarantor or School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School in it	Column 2: The creditor to Check all schedules that a  Check all schedules that a  Schedule D, line Schedule G, line  Schedule D, line Schedule E/F, line Schedule G, line  Schedule E/F, line Schedule G, line Schedule G, line Schedule E/F, line Schedule D, line	creditor on schedule D, whom you owe the debt oply:
in Column 1 shown in lin Schedule D Schedule E/Column 1: Y Name Number City Name Number	/F, or Schedule G to f	fill out Column 2.  State	your spouse as a codel in is a guarantor or cosign is a guarantor or cosign is a guarantor or School in its a guarantor or School is a guarantor or School is a guarantor or School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School is a guarantor of School in its a guarantor of School in it	Column 2. The creditor to Check all schedules that a  Schedule D, line Schedule D, line Schedule D, line Schedule E/F, line	creditor on schedule D, whom you owe the debt oply:

Official Form 106H

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Document Page 44 of 67 Case number (if known)_ Suzanne M Miller-Korstanje Debtor 1 Additional Page to List More Codebtors Column 2: The creditor to whom you owe the debt Column 1: Your codebtor Check all schedules that apply: 3.__ Schedule D, line ____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line _____ Number State City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line _____ Number Street ZIP Code State City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line _____ Street Number ZIP Code State City ☐ Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line ____ Number Street ZIP Code State City Schedule D, line _____ Name Schedule E/F, line _____ ☐ Schedule G, line ____ Street Number ZIP Code City Schedule D, line _____ Name Schedule E/F, line _____ ☐ Schedule G, line _____ Number Street ZIP Code State City Schedule D, line _____ Name ☐ Schedule E/F, line _____ ☐ Schedule G, line _____ Street Numbe ZIP Code State City

page ___ of ___

☐ Schedule D, line _____

Schedule E/F, line _____ Schedule G, line _____

State

ZIP Code

City

Name

Number

Street

3.

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Fill in this information to identify yo	ur çase:			
Polytor 1 Suzanne M Miller-K				
Debtor 1 Suzatifie Willowing 19	Middle Name Løst I	Vame		
Debtor 2 (Spouse, if filing) First Name	Middle Name Last	Name		
United States Bankruptcy Court for the: No	orthern District of Illinois			
Case number			Check if this	
(H known)			☐ An amend	ded filing ment showing postpetition chapter 13
Lagorithm and the second secon			income a	s of the following date:
Official Form 106l			MM / DD /	YYYY
Schedule I: You	r Income			12/15
Be as complete and accurate as possupplying correct information. If you if you are separated and your spous separate sheet to this form. On the	se is not filing with you, do top of any additional pages			
The Chapter of the Ch	A CONTRACTOR OF THE CONTRACTOR			Debtor 2 or non-filing spouse
<ol> <li>Fill in your employment information.</li> </ol>		Debtor 1		Desitor 2 of front sining opening
If you have more than one job, attach a separate page with information about additional employers.	Employment status	☐ Employed ☐ Not employed		☐ Employed ☐ Not employed
Include part-time, seasonal, or self-employed work.	Occupation			
Occupation may include student or homemaker, if it applies.	Employer's name			
	Employer's address	Number Street		Number Street
		City	State ZIP Code	City State ZIP Code
	How long employed there			
O' - Pataile Abou	it Monthly Income			
Estimate monthly income as a spouse unless you are separate if you or your non-filing spouse below. If you need more space,	of the date you file this form d.	r, combine the info	ng to report for any line, wr	rite \$0 in the space. Include your non-filing or that person on the lines
below, If you need more space,	allauti a separate onto te es		For Debtor 1	For Debtor 2 or non-filing spouse
<ol> <li>List monthly gross wages, s deductions). If not paid monthl</li> </ol>	alary, and commissions (be y, calculate what the monthly	fore all payroll wage would be.	2. § <u>0.00</u>	\$
3. Estimate and list monthly ov	vertime pay.		3. +\$ 0.00	+ \$
4. Calculate gross income. Add	1 line 2 + line 3.		4. \$ 0.00	\$

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Fast Name Middle Name Last Name							
		For De	btor 1	For Debto non-filing			
ppy line 4 here	<b>4</b> .	\$		\$			
st all payroll deductions:							
a. Tax, Medicare, and Social Security deductions	5a.	\$	0.00				
b. Mandatory contributions for retirement plans	5b.	\$	0.00				
cc. Voluntary contributions for retirement plans	5c.	\$	0.00				
5d. Required repayments of retirement fund loans	5d.	\$	0.00	•••			
	5e.	\$	0.00				
Se. Insurance Sf. Domestic support obligations	5f.	\$	0.00	\$			
	5g.	\$	0.00	\$			
5g. Union dues	-	<del>+</del> \$	0.00	+ \$			
5h. Other deductions. Specify:	•	\$	0.00	<i>6</i> 9			
Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5h			0.00				
Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	0.00	\$			
List all other income regularly received:							
8a. Net income from rental property and from operating a business,							
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total		S	0.00	\$			
monthly net income.	8a.	·	0.00	s			
on Inforest and dividends	8b.	\$		Ψ			
8c. Family support payments that you, a non-filing spouse, or a depend	dent						
regularly receive Include alimony, spousal support, child support, maintenance, divorce		s.	0.00	\$			
settlement, and property settlement.	8c.	Ψ					
8d. Unemployment compensation	8d.	\$	0.00	\$			
8e. Social Security	8e.	\$	1,234.00	\$			
or Other payornment assistance that you regularly receive							
	ance						
that you receive, such as food stamps (benefits under the Supplementa Nutrition Assistance Program) or housing subsidies.	•		00.00	٠			
Specify:	8f.	\$	93.00	\$			
	8g	. \$	0.00	\$			
8g, Pension or retirement income	8h	. +s	308.00	+ \$		_	
8h. Other monthly income. Specify: Dependent SSDI	9.		1,635.00	<b>s</b>		7	
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.				1 <u></u>		٦ _. [	s 1,635.
D. Calculate monthly income. Add line 7 + line 9.  Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	1	L	1,635.00	\$			\$
State all other regular contributions to the expenses that you list in So	hedule	J.		ommatec a	nd other		
Include contributions from an unmarried partner, members of your notative	, , , o a.		ients, your ro	enses listed	in Schedule .	J.	
friends or relatives.  Do not include any amounts already included in lines 2-10 or amounts that	are not	ичинии	o to bal aut		1	1. 🏲	\$0
Specify:			n combined r	anthly inco	ne.		4 000
<ol> <li>Add the amount in the last column of line 10 to the amount in line 11.</li> <li>Write that amount on the Summary of Your Assets and Liabilities and Certe</li> </ol>	The res	iuit is the istical In	formation, if	t applies	1	2.	\$ 1,635 Combined monthly inco
13. Do you expect an increase or decrease within the year after you file t	hie for	m?					

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Fill in this information to identify your case:			
Company Million Kontonie			
Debtor 1 Suzanne in Miller-Robsteinje First Name Middle Name Last Name	Check if thi		
Debtor 2 {Spouse, if filing} First Name Middle Name Last Name		nded filing ement showing post-petiti	on chanter 13
United States Bankruptcy Court for the: Northern District of Illinois	expense	es as of the following date	:
Case number	MM / DE		
(If known)	A separ	ate filing for Debtor 2 bec ns a separate household	ause Debtor 2
Official Form B 6J	maintai	ns a separate household	
Schedule J: Your Expenses			12/13
Be as complete and accurate as possible. If two married people are filin information. If more space is needed, attach another sheet to this form. (if known). Answer every question.	g together, both are equally re On the top of any additional p	esponsible for supplying co pages, write your name and	orrect I case number
Parcels Describe Your Household	DOCUMENTS OF THE PROPERTY OF T		
1. Is this a joint case?			
No. Go to line 2.  Yes. Does Debtor 2 live in a separate household?			
Yes. Debtor 2 must file a separate Schedule J.			
2. Do you have dependents? No  Do not list Debtor 1 and ✓ Yes. Fill out this information for	Dependent's relationship to Debtor 1 or Debtor 2		oes dependent live ith you?
Debtor 2. each dependent	Son	10	No Zivos
Do not state the dependents' names.		<u> </u>	Yes No
			Yes
			No
			Yes
	***************************************		No Yes
			No
	MARINE STATE OF THE STATE OF TH		Yes
3. Do your expenses include expenses of people other than yourself and your dependents?			
Part 2: Estimate Your Ongoing Monthly Expenses			to sono of
Estimate your expenses as of your bankruptcy filing date unless you a expenses as of a date after the bankruptcy is filed. If this is a supplem applicable date.	re using this form as a supple ental Schedule J, check the b	ement in a Chapter 13 case  ox at the top of the form an	d fill in the
Include expenses paid for with non-cash government assistance if yo	u know the value	Vallegrange	~
of such assistance and have included it on Schedule I: Your Income (	Official Form B 6l.)	Your expense	•
<ol> <li>The rental or home ownership expenses for your residence. Include any rent for the ground or lot.</li> </ol>	e first mortgage payments and	4. \$	825.00
If not included in line 4:		4- 6	0.00
4a. Real estate taxes		4a. \$	0.00
4b. Property, homeowner's, or renter's insurance		4b. \$	0.00
4c. Home maintenance, repair, and upkeep expenses		4c. \$	0.00
4d. Homeowner's association or condominium dues		40. V	

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nah	Suzanne M Miller-Korstanje Case numb	er (if known)	
ں پ	First Name Middle Name Last Name		
			Your expenses
5.	Additional mortgage payments for your residence, such as home equity loans	5.	\$
Ь.	Utilities: 6a. Electricity, heat, natural gas	6a.	\$40.00
	eb. Water, sewer, garbage collection	6b.	\$0.00
	6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$ 168.00
	6d. Other Specify:	6d.	\$
7	Food and housekeeping supplies	7.	\$ <u>397.00</u>
	Childcare and children's education costs	8.	\$
8. 9.	Clothing, laundry, and dry cleaning	9.	\$ 180.00
э. О.	Personal care products and services	10.	\$
11.	Medical and dental expenses	11.	\$
12.	Transportation, include gas, maintenance, bus or train fare.		•
٠4.	Do not include car payments.	12.	\$
13.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$
14.	Charitable contributions and religious donations	14.	\$
15.	Insurance.  Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$
	15b. Health insurance	15b.	\$
	15c. Vehicle insurance	15c.	\$ 25.00
	15d. Other insurance. Specify:	15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
18.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).	18.	\$
19.	Other payments you make to support others who do not live with you.		
	Specify:	19.	\$
20.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your	r Income.	
	20a. Mortgages on other property	20a.	\$
	20b. Real estate taxes	20b.	\$
	20c. Property, homeowner's, or renter's insurance	20c.	\$
	20d. Maintenance, repair, and upkeep expenses	20d.	\$
	on- Homogymor's association or condominium dues	20e.	\$

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	Suzanne M Miller-Korstanje Case number (# know	ານ ໄດ້	
Debtor 1	First Name Middle Name Last Name		
22. Your r	Specify:	21. 22.	+\$ \$1,635.00
23a. ( 23b. ( 23c. (	te your monthly net income.  Topy line 12 (your combined monthly income) from Schedule I.  Topy your monthly expenses from line 22 above.  Subtract your monthly expenses from your monthly income.  The result is your monthly net income.	23a. 23b. 23c.	\$ 1,635.00 -\$ 1,635.00 \$ 0.00
	expect an increase or decrease in your expenses within the year after you file this form?  ample, do you expect to finish paying for your car loan within the year or do you expect your  age payment to increase or decrease because of a modification to the terms of your mortgage?  Explain here: I will have student loans. Also need to move to a 2 bedroom a the expenses.	partm	ent so that will increase

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in this information to identify your case:  hter 1 Supervise Makie New Car-Y	702stanlo	
btor 1 First Name Middle Name	Last Name	
Middle Name	Last Name	
nited States Bankruptcy Court for the:	(mois	
ise number known)		Check if this is
NIOT 9		amended filing
Official Form 106Dec		
Design About an Ind	lividual Debtor's Schedules	12/1
if two married people are filing together, both are equally	y responsible for supplying correct mornishes.  nedules or amended schedules. Making a false statement, concealing a bankruptcy case can result in fines up to \$250,000, or imprisonments.	a property. Of
years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.		
Did you hav or agree to pay someone who is NOT an		
Dig you pay or agree to pay	n attorney to help you fill out bankruptcy forms?	
No	n attorney to help you fill out bankruptcy forms?	on, and
	n attorney to help you fill out bankruptcy forms?  Attach Bankruptcy Petition Preparer's Notice, Declaration  Signature (Official Form 119).	on, and
⊠ No	Attach Bankruptcy Petition Preparer's Notice, Declaration	on, and
No Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	on, and
No Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration	on, and
No Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	on, and
No Yes. Name of person  Index penalty of perjury, I declare that I have read t	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).	on, and
Under penalty of perjury, I declare that I have read to that they are true and correct.	Attach Bankruptcy Petition Preparer's Notice, Declaration Signature (Official Form 119).  Signature (Official Form 119).  The summary and schedules filed with this declaration and	on, and

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1	Fill in this information to identify yo  Debtor 1 Suparation  First Name  Debtor 2 (Spouse, if filing) First Name  United States Bankruptcy Court for the: No	Middle Name  Last Name  Last Name  Last Name	expenses	ded filing ment showing postp s as of the following	petition chapter 13 date:
	Case number (If known)		MM / DD /	YYYY	
	Official Form 106J-2				
	Schedule J-2: Ex	moneos for Senar	ate Household	of Debtor 2	2 12/15
D oz ne g	Use this form for Debtor 2's separate Debtor 2 have one or more dependently with respect to expenses for Debtor 2 have another sheet to this question.  Part 1: Describe Your House Do you and Debtor 1 maintain sep	nts in common, list the dependents but or 2 that are not reported on Sch form. On the top of any additional ehold arate households?	e on poth Schedule Janu this ro nedule J. Be as complete and at	ccurate as possible.	If more space is
(	☐ Yes		and the second s		,,,,
2.	. Do you have dependents?	□ No	Dependent's relationship to	Dependent's	Does dependent live with you?
	Do not list Debtor 1 but list all other dependents of Debtor 2 regardless of whether listed as a dependent of Debtor 1 on Schedule J.	Yes. Fill out this information for each dependent	Debtor 2:    —————————————————————————————————	age	☐ No ☐ Yes ☐ No
	Do not state the dependents' names.				Yes No Yes No Yes No Yes No Yes
	B. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	□ No □ Yes			
	Estimate Your Ongoin Estimate your expenses as of your expenses as of a date after the band Include expenses paid for with non such assistance and have included	bankruptcy filing date unless you a kruptcy is filed. -cash government assistance if yo i it on <i>Schedule I: Your Income</i> (Off	u know the value of ficial Form 106l.)	ment in a Chapter 13  Your exp	
	The rental or home ownership e any rent for the ground or lot.	xpenses for your residence. Include	e nisi mongage payments and	4. \$	
	If not included in line 4:			4a. \$	
	4a. Real estate taxes			4a. \$	
	4b. Property, homeowner's, or re				
	4c. Home maintenance, repair,				
	4d Homeowner's association or	condominium dues		4d. \$	

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Case number (if known)_ Debtor 1 First Name Middle Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans 5. 6. Utilities: 6a. Electricity, heat, natural gas 6a. 6b. Water, sewer, garbage collection 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Other. Specify: ___ 6d. \$ 7. Food and housekeeping supplies 8. Childcare and children's education costs 9. Clothing, laundry, and dry cleaning 10. Personal care products and services 11. Medical and dental expenses Transportation. Include gas, maintenance, bus or train fare. 12. Do not include car payments. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 1 T 16. ٤ 17. Ir 18. **Y** У 19. S 20.

Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a.	\$
15a. Life insurance	15b.	\$
15b. Health insurance	15c.	\$
15c. Vehicle insurance	15d.	\$
15d. Other insurance. Specify:		
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.  Specify:	16.	\$
Installment or lease payments:	17a.	\$
17a. Car payments for Vehicle 1	,	\$
17b. Car payments for Vehicle 2	17b.	***
17c. Other. Specify:	17c.	\$
17d. Other. Specify:	17d.	\$
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$
Other payments you make to support others who do not live with you.  Specify:	19.	\$
Specify:	e.	
Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	20a.	\$
20a. Mortgages on other property		\$
20b. Real estate taxes	20b.	\$
20c. Property, homeowner's, or renter's insurance	20c.	
20d. Maintenance, repair, and upkeep expenses	20d.	<i>t</i> r
20e. Homeowner's association or condominium dues	20e.	\$
Official Form 106J-2 Schedule J-2: Expenses for Separate Household of Debtor 2		page

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	Case number (if known)
Deb	OF 1 First Name Middle Name Last Name
21.	Other. Specify:
22.	Your monthly expenses. Add lines 5 through 21.  The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2.
23.	Line not used on this form.
24.	Do you expect an increase or decrease in your expenses within the year after you file this form?
	For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?
	□ No. □ Yes. Explain here:

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Fill in this information to identify your case.				
Debtor 1 Suzanne M Miller-Korstanje Frist Name Meddle Name	Last Name			
Debtor 2 (Spouse, if filing) Past Name Middle Name	Lest Name			
United States Bankruptcy Court for the: Northern District of Illi	nois			
Case number			Executive Control of the Control of	Check if this is an
(if known)				amended filing
			No.	
Official Form 107				
Statement of Financial Affairs	s for Indivi	duals Filing f	or Bankruptcy	04/16
Be as complete and accurate as possible. If two marrie information. If more space is needed, attach a separat number (if known). Answer every question.	e sheet to this form	i. On the top of any addition	ly responsible for supplyli ional pages, write your na	ng correct ime and case
Park R Give Details About Your Marital State	us and Where Yo	u Lived Before		
What is your current marital status?				
☐ Married  Mot married				
2. During the last 3 years, have you lived anywhere on the last 3 years. The last 3 years are something the last 3 years. List all of the places you lived in the last 3 years.	ears. Do not include	where you live now.		Dates Debtor 2
Debtor 1:	Dates Debtor 1 lived there	Debtor 2:		lived there
		Same as Debtor 1		Same as Debtor 1
2276 w. Nichols Rd	From 01/02/201			From
Number Street	To	Number Street		То
Apt. A				
Arlington Hts. II 60004  City State ZiP Code		City	State ZIP Code	
		Same as Debtor 1		Same as Debtor 1
	From	Number Street		From
Number Street	To	Mauriber 20eer		То
City State ZIP Code	-	City	State ZIP Code	
<ul> <li>Within the last 8 years, did you ever live with a si states and territories include Arizona, California, Ida</li> <li>No</li> <li>Yes. Make sure you fill out Schedule H: Your Co</li> </ul>	no, Louisiaira, iveva	Id, IVEW WIEXICO, I DONO	roperty state or territory? ico, Texas, Washington, an	(Community property d Wisconsin.)

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Debtor 1 Suzanne M Miller-Korstanje First Name Middle Name Last N		Vene	Case nu	mber (if known)	
F	Did you have any income from employmen Fill in the total amount of income you received If you are filing a joint case and you have inco	i from all jobs and all bus	inesses, including part-tir	ne activities.	endar years?
	☑ No ☑ Yes. Fill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions an exclusions)
	From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips	\$0.00	Wages, commissions, bonuses, tips  Operating a business	\$
		Operating a business			
	For last calendar year:	Wages, commissions, bonuses, tips	_{\$} 5,091.00	Wages, commissions, bonuses, tips	\$
	(January 1 to December 31.2014	Operating a business	¥	Operating a business	
	For the calendar year before that:	☐ Wages, commissions,		Wages, commissions,	
	(January 1 to December 31, <b>2013</b>	bonuses, tips  Operating a business	\$0.00	bonuses, tips  Operating a business	\$
(	gambling and lottery winnings. If you are filing ist each source and the gross income from each No				
ţ	Yes. Fill in the details.	Debtor 1		Debtor 2	
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
	From January 1 of current year until	SSDI	§ 1,234.00		- \$
	the date you filed for bankruptcy:	SSDI	\$308.00		- \$
		and the second s	\$		- \$
	For last calendar year:	SSDI	\$1,234.00		_ \$
	(January 1 to December 31,2014	SSDI	\$ 308.00		- \$
	YYYY		\$		- \$
	Tautha nalandar was hatasa bhas	SSDI	s 1,190.00		\$
	For the calendar year before that:  (January 1 to December 31,2013	SSDI	\$ 1,190.00		_
	(January 1 to December 31, 22)		\$		_

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Debtor 1	Suzanne M Miller-Korstanje First Name Middle Name Last Name		Case	number (# known)	VINE A de deservo
Part 3	List Certain Payments You Made Befo	re You Filed	l for Bankruptcy		
				de de la companya de	
6. Are eit	ther Debtor 1's or Debtor 2's debts primarily o	onsumer deb	ets?		
<b>Ø</b> No	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a perso	nal, family, or I	household purpose."		1(8) as
	During the 90 days before you filed for bankru	ptcy, did you p	pay any creditor a total o	f \$6,425* or more?	
	No. Go to line 7.				
	Yes. List below each creditor to whom you total amount you paid that creditor. D child support and alimony. Also, do n * Subject to adjustment on 4/01/19 and every	o not include p ot include payı	payments for domestic s ments to an attorney for	upport obligations, such as this bankruptcy case.	
	s. Debtor 1 or Debtor 2 or both have primarily			and the date of dajastment.	
west 160	During the 90 days before you filed for bankrup			\$600 or more?	
	No. Go to line 7.	, ,	- , - , - , - , - , - , - , - , - , - ,		
	Yes. List below each creditor to whom you creditor. Do not include payments for alimony. Also, do not include paymen	domestic supr	ort obligations, such as	child support and	
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for
		W-777 (P000) APA - 100-14 AAA - 14 - 14 - 14	\$	\$	☐ Mortgage
	Creditor's Name				Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
			\$	\$	☐ Mortgage
	Creditor's Name		•		Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City State ZIP Code				Other
			€.	œ.	
	Creditor's Name		\$	\$	☐ Mortgage
					Car
	Number Street				Credit card
					Loan repayment
					Suppliers or vendors
	City City 710 Care				Other

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btor 1	Suzanne M Miller-Korstanje First Name Middle Name Last Name		<u>.</u>	Case number (if known	1
	First Name Middle Name Last Name				
corpo agen such		elatives of any on in control, o	general partners; r owner of 20% or	partnerships of which more of their voting	th you are a general partner; securities; and any managing
LJ Y	es. List all payments to an insider.	Dates of payment	Total amount	Amount you still owe	Reason for this payment
		payment	paio	OWE	
	Insider's Name		\$	\$	
	Number Street	verez an			
		<del></del>			
	City State ZIP Code		_		
	insider's Name	N. S.	\$	\$	
	Number Street	<u> </u>			
		<del></del>			
	City State ZIP Code				
an in: Includ	n 1 year before you filed for bankruptcy, did yo sider? de payments on debts guaranteed or cosigned by o es. List all payments that benefited an insider.		ayments or trans  Total amount paid	Amount you still owe	
Ī	Insider's Name	·	\$	\$	
ì	Number Street	***************************************			
-		Programme and the second of the second of			
č	City State ZIP Code				
î	nsider's Name		\$	\$	
		<u></u>			
ŀ	Number Street	· · · · · · · · · · · · · · · · · · ·			
***		<u> </u>			
7	Cial TID Onda				

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CH Identify Legal Actions, Reposs	essions, and Foreclosures			
ithin 1 year before you filed for bankrupt st all such matters, including personal injury id contract disputes.				
No Yes. Fill in the details.				
res. Fill by the details.	Nature of the case	Court or agency		Status of the ca
Case title St. Gregory Parish Cre	Loan from credit union revived from 2005. Wage	Richard J. Da	ley Center	— Dending
vs. Suzanne Miller	garnishment granted by	50 W. Washin	agton	On appeal
Case number 05 M1 141697	court on 10/2/2015	Number Street  Chicago	II 60601	Concluded
Case number OOM 171007		City	State ZIP Code	
				— 🔲 Pending
Case title		Court Name		On appeal
Hadronian and the second and the sec		Number Street		Concluded
Case number		City	State ZIF Code	ornidatio.
neck all that apply and fill in the details below No. Go to line 11.			a, gamonoo, aaacma	, seizeu, or ieviet
-			Date	
No. Go to line 11.	N.			
No. Go to line 11.	N.			Value of the prope
No. Go to line 11. Yes. Fill in the information below.	Describe the property  Explain what happened			Value of the prope
No. Go to line 11. Yes. Fill in the information below.  Creditor's Name	Describe the property  Explain what happened  Property was repo	ssessed.		Value of the prope
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Describe the property  Explain what happened  Property was repo Property was forect Property was garn	ssessed. closed. ished.	Date	Value of the prope
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name	Describe the property  Explain what happened  Property was repo Property was forect Property was garn	ssessed. closed.	Date	Value of the prope
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Describe the property  Explain what happened  Property was repo Property was fored Property was garn Property was attack	ssessed. closed. ished.	Date	Value of the proper \$
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street	Describe the property  Explain what happened  Property was repo Property was fored Property was garn Property was attack	ssessed. closed. ished.	Date	Value of the prope  Value of the prope  Value of the prop
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZiP Co	Explain what happened Property was repo Property was fored Property was garn Property was attact Describe the property	ssessed. closed. ished.	Date	Value of the proparties of the
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Describe the property  Explain what happened  Property was repo Property was fored Property was garn Property was attack	ssessed. closed. ished. ched, seized, or levier	Date	Value of the prope  \$  Value of the prop
No. Go to line 11.  Yes. Fill in the information below.  Creditor's Name  Number Street  City State ZIP Co	Explain what happened Property was repo Property was fored Property was garn Property was attact Describe the property  Explain what happened	ssessed. closed. ished. ched, seized, or levier ssessed. closed.	Date	Value of the proparties of the

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	Suzanne M Miller-Korstanje First Name Mixelio Name Lest N	ama	Case number (# 1600	em)	
COU No	n 90 days before you filed for bankrup ints or refuse to make a payment beca o es. Fill in the details.	tcy, did any creditor, including a ba ause you owed a debt?	nk or financial inst	itution, set off any ar	nounts from you
	o. The first of double.	Describe the action the creditor took		Date action was taken	Amount
Cre	editor's Name				
Nur	mber Street			<del> </del>	\$
City	y State ZIP Code	Last 4 digits of account number: XX	XX	<del></del>	
No	a 2 years before you filed for bankrupt os. Fili in the details for each gift.	cy, did you give any gifts with a tota	al value of more tha	n \$600 per person?	
No Ye		cy, did you give any gifts with a total	al value of more tha	Dates you gave the gifts	Value
No Ye G	es. Fill in the details for each gift.		al value of more tha	Dates you gave	Value \$
No Ye G	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 er person		al value of more tha	Dates you gave	Value \$\$
Yee G P Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 er person		al value of more tha	Dates you gave	Value \$\$
Yee G P Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 eer person  rson to Whom You Gave the Gift  mber Street		al value of more tha	Dates you gave	Value \$\$
Ye G p	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 eer person  rson to Whom You Gave the Gift  mber Street		al value of more tha	Dates you gave	Value \$\$
Per City	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 ter person  rison to Whom You Gave the Gift  mber Street		al value of more tha	Dates you gave	Value  \$  Value
Per City	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 ser person  rson to Whom You Gave the Gift  where Street  y State ZIP Code  erson's relationship to you  fts with a total value of more than \$600	Describe the gifts	al value of more tha	Dates you gave the gifts	\$ \$ Value
Per City	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 ser person  From to Whom You Gave the Gift  The state of the Street of th	Describe the gifts	al value of more tha	Dates you gave the gifts	\$ \$ Value
Per City Per	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 ser person  From to Whom You Gave the Gift  The state of the Street of th	Describe the gifts	al value of more tha	Dates you gave the gifts	\$Value
Per Gift Pe	es. Fill in the details for each gift.  Sifts with a total value of more than \$600 ser person  From to Whom You Gave the Gift  The state of the Street of th	Describe the gifts	al value of more tha	Dates you gave the gifts	\$Value

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btor 1	Suzanne M Miller-Korstanje	Case number (# known)		<del></del>
	T JUST ROPTIC WINGSHE ROPTIO	NAME (AV		
ı. With	in 2 years before you filed for bankrupt	tcy, did you give any gifts or contributions with a total valu	e of more than \$60	00 to any charity?
<b>2</b>	No Yes. Filt in the details for each gift or contr	ibution		
-	Gifts or contributions to charities	Describe what you contributed	Date you	Value
	that total more than \$600		contributed	
7	Charity's Name			\$
	manty's reame			\$
Ñ	lumber Street			
ć	City State ZIP Code			
art 6:	List Certain Losses		angkan dikingan dikin silan bilan siyangan kan dikingan dikingan kan kan kan kan kan dikingan dikingan dikinga	kair ytti myttiin yhtiä yyhteiyin aysteriin kyyten ytti talkiin sa ytti kasti masti kanta myötti viitiin tiit a
disa	ster, or gambling? No	cy or since you filed for bankruptcy, did you lose anything	,	,
۲ است	es. Fill in the details.	December on the face	Data afrons	Value of manager
	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost
				\$
awyk With		rers cy, did you or anyone else acting on your behalf pay or trar	nsfer any property	to anvone
you	consulted about seeking bankruptcy o			<b>,</b>
Z	4o		. ,	
L. Y	es. Fill in the details.	Proposition and value of any annually beautiful and	Data agreement on	for our for pour ont
	Person Who Was Paid	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
	Number Street		Autoritation and activities activities and activities activities and activities activities and activities activi	\$
				\$
	City State ZIP Code			Lancation Lancation Associated Lancation Commission Com
	Email or website address			
	Person Who Made the Payment, if Not You			

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otor 1	Suzanne M Miller-Korstanje First Name Middle Name Last N	iame	Case number (#known)		
		Description and value of any property tra	ansferred	Date payment or transfer was made	Amount of payment
	Person Who Was Paid				\$
	Number Street				ē
					۹
	City State ZIP Code		v		
	Email or website address	-			
	Person Who Made the Payment, if Not You				
Do r	mised to help you deal with your credit not include any payment or transfer that y No Yes. Fill in the details.	ou listed on line 16.		Date payment or	Amount of paym
		Description and value of any property tr	ansferred	transfer was made	Anount of payor
	Person Who Was Paid				\$
	Number Street				\$
	City State ZiP Code	_			
tran Incl Do		business or financial affairs? made as security (such as the granting o			
umi	Yes. Fill in the details.	Description and value of property transferred	Describe any property or debts paid in excha		d Date transfe was made
	Person Who Received Transfer				
	Number Street				
	City State Z:P Code				
	Person's relationship to you				
	Person Who Received Transfer				many of the state
	Number Street				
	City State ZIP Code				

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tor 1	Suzanne M Miller-Korstanje Føst Name Middle Name Last Nat	me	Case number of know	(75)	
are a	n 10 years before you filed for bankrup beneficiary? (These are often called ass o es. Fill in the details.	tcy, did you transfer any property set-protection devices.)	r to a self-settled trust	t or similar device of wh	nich you
emen r		Description and value of the proper	ty transferred		Date transfer was made
N	ame of trust				<u></u>
irt 8:	List Certain Financial Accounts in 1 year before you filed for bankrupto	, Instruments, Safe Deposit	Boxes, and Storag	e Units	CONTRACTOR
Inclubrok	ed, sold, moved, or transferred? ude checking, savings, money market, terage houses, pension funds, coopera No Yes. Fill in the details.	or other financial accounts; certinatives, associations, and other fir Last 4 digits of account number	ancial institutions.  Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance be closing or trans
	Name of Financial Institution	xxxx	Checking	ey yanda kurus ki kina kananan kuri kiri.	\$
	Number Street		☐ Savings ☐ Money market ☐ Brokerage		
	City State ZIP Code		Other		
	Name of Financial Institution	XXXX	Checking Savings		\$
	Number Street		☐ Money market ☐ Brokerage ☐ Other		
	City State ZIP Code				
1. Do	you now have, or did you have within ocurities, cash, or other valuables?	1 year before you filed for bankru	ptcy, any safe deposi	t box or other depositor	ту тог
Z					
Z	Yes. Fill in the details.	Who else had access to it?	Describe	the contents	have it
Z	Yes. Fill in the details.  Name of Financial Institution	Who else had access to it?	Describe	the contents	have it
Z			Describe	the contents	Do you have it? □ No □ Ye

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ve you stored property in a storage unit	or place other than your home within	1 year before you filed for bankruptcy?	•
No			
Yes. Fill in the details.	Who else has or had access to it?	Describe the contents	Do you still have it?
			☐ No ☐ Yes
Name of Storage Facility	Name		
Number Street	Number Street	Andrewy and Andrews Transport	
	CityState ZIP Code		
City State ZIP Code			
	anteliar tamanta Flaa		
(13) Identify Property You Hold	or Control for Someone Else	иниститура при	nageomiczniczeńskiemszenskiegoszoczoczykópawane zykipówczna
Do you hold or control any property that	someone else owns? include any pro-	perty you borrowed from, are storing in	J1,
or hold in trust for someone.			
<b>X</b> No			
Yes. Fill in the details.		Describe the property	Value
	Where is the property?	Describe are Stabases	
			\$
Owner's Name			<u> </u>
Also was a crystal such as converted as a crystal such as crystal such as crystal such as converted as a crystal such as converted as a crystal such as converted	Number Street		
Number Street		property for Management Control of the Section of t	
marketing of the desired of the strong of th	State ZIP C	ode	
City State ZIP Code	City State ZIP C	ode	
City	City	ode	and of well-security to the constant of the security of the se
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Give Details About Enviro	nmental Information	corning pollution, contamination, relea	uses of
r the purpose of Part 10, the following de Environmental law means any federal, se hazardous or toxic substances, wastes, including statutes or regulations control	nmental Information  efinitions apply: state, or local statute or regulation con, or material into the air, land, soil, sur	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material.	
r the purpose of Part 10, the following de Environmental law means any federal, s hazardous or toxic substances, wastes, including statutes or regulations control	nmental Information  efinitions apply: tate, or local statute or regulation con, or material into the air, land, soil, sur liling the cleanup of these substances	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material.	
r the purpose of Part 10, the following de Environmental law means any federal, shazardous or toxic substances, wastes, including statutes or regulations control Site means any location, facility, or projectible of the used to own, operate, or utilities it or used to own.	nmental Information  efinitions apply: state, or local statute or regulation con, or material into the air, land, soil, sur elling the cleanup of these substances perty as defined under any environmental ize it, including disposal sites.	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operat	e, or
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THE Give Details About Environmental law means any federal, shazardous or toxic substances, wastes, including statutes or regulations control site means any location, facility, or projutilize it or used to own, operate, or util Hazardous material means anything an substance, hazardous material, pollutate port all notices, releases, and proceeding. Has any governmental unit notified your No	nmental Information efinitions apply: state, or local statute or regulation con, or material into the air, land, soil, sur elling the cleanup of these substances perty as defined under any environmentative it, including disposal sites. environmental law defines as a hazare ent, contaminant, or similar term. engs that you know about, regardless o	cerning pollution, contamination, relea face water, groundwater, or other med , wastes, or material. ntal law, whether you now own, operat dous waste, hazardous substance, tox f when they occurred.	e, or ic nmental law?
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e vou notified anv governn	nental unit of any release of hazardo	us material?	
No			
Yes. Fill in the details.	Governmental unit	Environmental law, if you know it	Date of notice
	Governmental unit	AND THE PROPERTY OF THE PROPER	M-14-3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-
Name of site			
Number Street	Number Street		
	City State	ZIP Code	
	AMERICAN CONTRACTOR OF THE CON		
City State			uto and acdore
ve you been a party in any	judicial or administrative proceeding	g under any environmental law? Include settleme	its and orders.
No			
Yes. Fill in the details.		Nature of the case	Status of the
	Court or agency	Mathie of the case	case
Case title			Pending
	Court Name		On appe
	Number Street	Activity and American systems of the Control of the	Conclud
	(ADITIDOS ON DOC		
Case number	City	State ZIP Code	
F. S.	out Your Business or Connection of for bankruptcy, did you own a bu	siness or have any of the following connections t	o any business?
A member of a limite  A partner in a partne  An officer, director, of	led for bankruptcy, did you own a buself-employed in a trade, profession, diability company (LLC) or limited liship or managing executive of a corporation of the voting or equity securities	siness or have any of the following connections to or other activity, either full-time or part-time iiability partnership (LLP)  ion  of a corporation  for each business.	
A member of a limite  A partner in a partne  An officer, director, of	led for bankruptcy, did you own a buself-employed in a trade, profession, dliability company (LLC) or limited listing or managing executive of a corporation of the voting or equity securities pplies. Go to Part 12.	siness or have any of the following connections to or other activity, either full-time or part-time liability partnership (LLP)  ion  of a corporation  for each business  of the business  Employer Identificat Do not include Social	ion number
Ithin 4 years before you fil  A sole proprietor or s  A member of a limite  A partner in a partne  An officer, director, o  An owner of at least  No. None of the above a  Yes, Check all that apply	led for bankruptcy, did you own a buself-employed in a trade, profession, dliability company (LLC) or limited listing or managing executive of a corporation of the voting or equity securities pplies. Go to Part 12.  If y above and fill in the details below for the nature of the procession of the nature of the procession of the process	siness or have any of the following connections to or other activity, either full-time or part-time liability partnership (LLP)  ion of a corporation  for each business of the business  Employer Identificat Do not include Social	ion number al Security number or ITM
A sole proprietor or s  A sole proprietor or s  A member of a limite  A partner in a partne  An officer, director, o  An owner of at least  No. None of the above a  Yes, Check all that apply	led for bankruptcy, did you own a buself-employed in a trade, profession, dliability company (LLC) or limited listing or managing executive of a corporation of the voting or equity securities pplies. Go to Part 12.	siness or have any of the following connections to or other activity, either full-time or part-time liability partnership (LLP)  ion  of a corporation  for each business of the business  Employer Identificat Do not include Social EIN:	ion number al Security number or ITM
Ithin 4 years before you fil  A sole proprietor or s  A member of a limite  A partner in a partne  An officer, director, o  An owner of at least  No. None of the above a  Yes, Check all that apply	led for bankruptcy, did you own a buself-employed in a trade, profession, dliability company (LLC) or limited listing or managing executive of a corporation of the voting or equity securities pplies. Go to Part 12.  If y above and fill in the details below for the nature of the procession of the nature of the procession of the process	siness or have any of the following connections to or other activity, either full-time or part-time liability partnership (LLP)  ion of a corporation  for each business of the business  Employer Identificat Do not include Social	ion number al Security number or ITM
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	Suzanne M Miller-Korstanje	vame Cesi	e number (if known)
		Describe the nature of the business	Employer Identification number Do not include Social Security number or ITI
i	Business Name		EIN:
	Number Street	Name of accountant or bookkeeper	Dates business existed
			FromTo ,
	City State ZIP Code		
Vith nsti	tutions, creditors, or other parties.	ptcy, did you give a financial statement to a	nyone about your business? Include all financial
	vo /es. Fill in the details below.		
		Date issued	
	Name	MM / DD / YYYY	
		***	
	Number Street		
		Nagara.	
	City State ZIP Code		
	Cinc Palett		
rt 1			
an	nave read the answers on this Statemnswers are true and correct. I underst connection with a bankruptcy case of U.S.C. §§ 152, 1341, 1519, and 3571.	ent of Financial Affairs and any attachments and that making a false statement, conceali an result in fines up to \$250,000, or impriso	s, and I declare under penalty of perjury that the ing property, or obtaining money or property by fi inment for up to 20 years, or both.
	~ r ~ \/		
	& man walner	s felder of the	
_	Signature of Debtor 1	Signature of Debtor 2	,
	15/2016	Date	46700
	id you attach additional pages to You	ır Statement of Financial Affairs for Individu	als Filing for Bankruptcy (Official Form 107)?
D			
	₹ LAG		
( )	) Yes		
Œ.	<b>]</b> Yes		
G C		who is not an attorney to help you fill out ba	ankruptcy forms?

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Debtor 1	Lanno	Mode Wil	War Kors	toosie
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court	for the British Bistric	ct of Illion	15
Case number				

#### Official Form 108

#### Statement of Intention for Individuals Filing Under Chapter 7

12/15

Check if this is an amended filing

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

#### Part 1:

**List Your Creditors Who Have Secured Claims** 

For any creditors that you listed in Part 1 of information below.	al Form 106D), fill in the	
Identify the creditor and the property that is o		Did you claim the property as exempt on Schedule C
Creditor's	☐ Surrender the property.	□ No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
Securing deat.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	. Mo
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
occurring dest.	Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	No
name:	Retain the property and redeem it.	Yes
Description of property securing debt:	Retain the property and enter into a Reaffirmation Agreement.	
	Retain the property and [explain]:	

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Debtor 1 Suzanal Villar-Koast

Case number (If known)

Part 2:

**List Your Unexpired Personal Property Leases** 

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G
fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	Yes
.essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	· ··· 🗖 Yes
.essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	Yes
essor's name:	□ No
Description of leased property:	Yes
t 3: Sign Below	
nder penalty of perjury, I declare that I have indicated my intention about any property of my estate ersonal property that is subject to an unexpired lease.	that secures a debt and any
De la	
Signature of Debtor 1 Signature of Debtor 2	
Date Date MM/ DD / YYYY	